

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Murphree
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 FEB 13 AM 11:21

DOCUMENT # P94000083825 (7)

1. Corporation Name

RICHARD B. BOYLE & ASSOCIATES, INC.

Principal Place of Business

3037 GEIGER COURT
CLEARWATER FL 34621

Mailing Address

3037 GEIGER COURT
CLEARWATER FL 34621

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Changed
11/14/1994

3g. Date of Last Report
INITIAL

2. Principal Place of Business

21 2625 McCORMICK DR

2a. Mailing Address

26 2625 McCORMICK DR

4. FEI Number

59-328-0729

Applied For
Not Applicable

22 Suite, Apt. #, etc.
103

27 Suite, Apt. #, etc.

103

5. Certificate of Status Desired

\$8.75 Additional Fee Required

23 City & State

CLEARWATER FL

28 City & State

CLEARWATER FL

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be Added to Fees

24 Zip

34619

25 Country

PINELLAS

29 Zip

34619

30 Country

PINELLAS

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent

BOYLE, RICHARD B
3037 GEIGER COURT
CLEARWATER FL 34621

10. Name and Address of New Registered Agent

B1 Name RICHARD B BOYLE
B2 Street Address (P.O. Box Number is Not Acceptable)
2625 McCORMICK DR
B3 # 103
B4 City CLEARWATER FL B5 Zip Code 34621

11. Pursuant to the provisions of Sections 607.02 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of Section 607.05, Florida Statutes.

SIGNATURE

(Signature, typed or printed (numbered responses) agent and title if applicable)

(Date, Department Agent (signature required when registering))

DATE

Richard B Boyle 1-19-95

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP
DPST	BOYLE, RICHARD B	3037 GEIGER COURT	CLEARWATER FL 34621
TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP
TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP
TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP
TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP
TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP
TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP
TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	PRESIDENT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	RICHARD B BOYLE	
1.3 STREET ADDRESS	CLEARWATER	
1.4 CITY - ST - ZIP	2625 McCORMICK DR #103 34619	
2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY - ST - ZIP		
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY - ST - ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY - ST - ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY - ST - ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY - ST - ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 199.02, Florida Statutes. I further certify that the information is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute the report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of this filing, or either alternative with an address.

SIGNATURE: *Richard B Boyle*
SIGNATURE AND TYPED OR PRINTED NAME OF HOLDING OFFICER OR DIRECTOR

1-19-95 813-725-9100
Date Telephone