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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

1996

Secretary of State
DIVISION OF CORPORATIONS

1330			∤	
DOCUMENT # P95000069448 (5) 1. Corporation Name				
GEORGE C. FAUGL, JR., P.A.				
320732 0 7 7 7 3 3 5 7 7 7 7 7 7 7 7 7 7 7 7 7 7				
	Malling Addrson		-	8116 84118 30111 81801 81881 1811 1881
Principal Place of Business Mailing Address				
19651 BRUCE B. DOWNS BLVD., STE. D-3142 TAMPA FL 33647 19651 BRUCE B. DOWNS BLVD., STE. D-2112 TAMPA FL 33647				59-3335661
IMMINIE WOTE			3. Date Incorporated or Qualified 38	. Date of Last Report
			08/31/1995	
Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21 19651 BRUCE B. DOWNS Blud.	26 1961 BRULG B.	Danns Blud.	59-93235661	Not Applicable
Suite, Apt. #, etc. 22 5014 6 6-4	Suite, Apt. #, etc. 27 Suite E6	-4	5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	City & State	1 .	6. Election Campaign Financing	\$5.00 May Be
23 TAMPA, FLORINA	28 TAMPA, FI	Country .	Trust Fund Contribution 8. This corporation has liability for intan-	Added to Fees
Zip Country 24 33647 25 Alleborach		Hilsborosh	Florida Statutes Yes	
g. Name and Address of Current		J.//	10. Name and Address of New Regis	tered Agent
		81 Name,	RGE O FAUGL JR	
FAUGL, GEORGE C JR. 82 Street Addres			ess (P.O. Box Number is Not Acceptable)	1
19651 BRUCE B. DOWNS BLVD., STE. D-3112			Beuce B. Davus BI	vo.
TAMPA FL 33647		501	te E6-4	
		84 City TA	mPA	FL 85 39 Code 7
11. Pursuant to the provisions of Sections 607.0502	and 607.1508, Florida Statutes, th	he above-named corpora	ation submits this statement for the purpose	e of changing its registered office
 Pursuant to the provisions of Sections 607.0502 or registered agent, or both, in the State of Florid familiar with, and accept the obligations of, Sections 	ia. Such chance was authorized D	y the corporation's boar	of directors. Thereby accept the appoint	ion as registered agent. To m
SIGNATURE Serve C 80	end of		4/20/	96
Signature, typed or print of ame of registered agent		ogistered Agent signature required	when reinstating) ADDITIONS/CHANGES TO OFFICEF	DATE DE AND DIDECTORS IN 12
12. OFFICERS AND	DIRECTORS DELETE	13.	AUDITIONS/CHANGES TO OFFICE	☐ Change ☐ Addition
	+ C	8		
ILLES BLUCK B. Q	WNS BING SVACEGY	1.3 STREET ADDRESS		
CITY-ST-ZIP TompA, FL 33	647	1.4 CITY~ST-ZIP		
TITLE	☐ DELETE	2 1 TITLE		Change Addition
NAME		22 NAME		
STREET ADDRESS		2.3 STREET ADDRESS	•	4"
CITY-ST-ZIP	DELETE	2.4 CITY - ST - ZIP		□ Change □ Addition
TITLE	[1] pereie	3. 1 TITLE 3.2 NAME		

6.4 CITY-S1-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 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report 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 this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

3.3 STREET ADDRESS

43 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5 4 CiTY-ST-ZIP

4.4 CITY-ST-ZIP

3.4 CITY-S1-ZIP

4 1 THILE

4.2 NAME

5. 1 TITLE

5.2 NAME

6 1 THILE

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-S1-2IP

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

TITLE

SIGNATURE AND YPED OR PRINTED NAMED - SIGNING OFFICER OR DIRECTOR

DELETE

DELETE

DELETE

1/120/96 6

69/3/991-7957 Dayting Prope #

Change

☐ Change

Change

Addition

☐ Addition

☐ Addition

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