

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

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**Mar 03 1997 8:00am
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # P95000073464 (6)
1. Corporation Name
RICHARD J. ROACH, JR., P.A.



Principal Place of Business: **9033 HERNANDO WAY BROOKSVILLE FL 34613**
Mailing Address: **9033 HERNANDO WAY BROOKSVILLE FL 34613-7413**

3. Date Incorporated or Qualified: **09/21/1995**
3a. Date of Last Report: **05/01/1996**
4. FEI Number: **59-3339603**
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

2. Principal Place of Business: **7239 GALLOWAY ROAD**
2a. Mailing Address: **7239 GALLOWAY ROAD**
22. City & State: **BROOKSVILLE, FL**
23. City & State: **BROOKSVILLE, FL**
24. Zip: **34613**
25. Country: [Blank]
26. Suite, Apt. #, etc.: [Blank]
27. Suite, Apt. #, etc.: [Blank]
28. City & State: **BROOKSVILLE, FL**
29. Zip: **34613**
30. Country: [Blank]

9. Name and Address of Current Registered Agent
**ROACH, RICHARD J JR
9033 HERNANDO WAY
BROOKSVILLE FL 34613**

10. Name and Address of New Registered Agent
81. Name: **ROACH, JR., RICHARD J.**
82. Street Address (P.O. Box Number is Not Acceptable): **7239 GALLOWAY ROAD**
83. [Blank]
84. City: **BROOKSVILLE, FL**
85. Zip Code: **34613**

11. Pursuant to the provisions of Sections 607.0502 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 607.0505, Florida Statutes.
SIGNATURE: *Richard J. Roach Jr* x **2/20/97**
(NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE	DPST	<input type="checkbox"/> DELETE
NAME	ROACH, RICHARD J JR.	
STREET ADDRESS	9033 HERNANDO WAY	
CITY-ST-ZIP	BROOKSVILLE FL 34613	
TITLE	VP	<input type="checkbox"/> DELETE
NAME	ROACH, SUSAN V	
STREET ADDRESS	9033 HERNANDO WAY	
CITY-ST-ZIP	BROOKSVILLE FL 34613	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	D/P/S/T	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	ROACH, JR., RICHARD J.	
1.3 STREET ADDRESS	7239 GALLOWAY ROAD	
1.4 CITY-ST-ZIP	BROOKSVILLE, FL 34613	
2.1 TITLE	VP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	ROACH, SUSAN V.	
2.3 STREET ADDRESS	7239 GALLOWAY ROAD	
2.4 CITY-ST-ZIP	BROOKSVILLE, FL 34613	
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 does not qualify for the exemption stated in Section 119.07(3)(i), 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 B-odd if changed, or on an attachment with an address.
SIGNATURE: *Richard J. Roach Jr* x **RICHARD J. ROACH, JR.** **2/20/97** (352) 596-9762
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)