

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

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

FILED

97 JUN 20 AM 8:12

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DOCUMENT # P96000031739 (1)

1. Corporation Name

MOSLEY & MOSLEY - ORLANDO, P.A.

Mosley & Mosley

Mosley & Mosley, P.A.

Principal Place of Business

Mailing Address

47 EAST ROBINSON STREET
SUITE 211
ORLANDO FL 32801

47 EAST ROBINSON STREET
SUITE 211
ORLANDO FL 32801-1862

2. Principal Place of Business

2a. Mailing Address

21 47 East Robinson Street

26 47 East Robinson Street

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 211

27 Suite 211

City & State

City & State

23 Orlando, Florida

28 Orlando, Florida

Zip

Country

Zip

Country

24 32801

25 USA

29 32801

30 USA

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

3a. Date of Last Report

04/11/1996

4. FEI Number

Applied For

59-3441523

Not Applicable

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

10. Name and Address of New Registered Agent

MOSLEY, DEAN F SR
47 EAST ROBINSON STREET
SUITE 211
ORLANDO FL 32801

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D
NAME MOSLEY, DEAN F SR
STREET ADDRESS 305 EAST ORANGE STREET
CITY-ST-ZIP ALTAMONTE SPRINGS FL 32701

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP
4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

TITLE
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STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
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 Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE [Signature]

JB 10-20-97
11/29/97 (402) 649-7411

CR2E034 (9/96)