

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **V12407 (5)**

1. Corporation Name
STEVEN R. KUTNER, P.A.



Principal Place of Business: **% STEVEN R. KUTNER, 202 LOOKOUT PLACE, S110, MAITLAND FL 32751, US**
Mailing Address: **P.O. BOX 948311, 202 LOOKOUT PLACE, S110, MAITLAND FL 32794-8311, US**

3. Date Incorporated or Qualified: **02/06/1992**
3a. Date of Last Report: **01/13/1995**
4. FEI Number: **59-3103503**
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: **21 151 Lookout Place, State, Apt. #, etc. 22 110, City & State: Maitland, Florida, Zip: 32751, Country: 25**
2a. Mailing Address: **26 151 Lookout Place, State, Apt. #, etc. 27 110, City & State: Maitland, Florida, Zip: 32751, Country: 29**

9. Name and Address of Current Registered Agent: **KUTNER, STEVEN R., 102 LOOKOUT PLACE, SUITE 110, MAITLAND FL 32751**

10. Name and Address of New Registered Agent: **81 Name: KUTNER, STEVEN R., 82 Street Address (P.O. Box Number is Not Acceptable): 151 Lookout Place, Suite 110, 83 City: Maitland, FL, 84 Zip Code: 32751, 85**

11. Pursuant to the provisions of Sections 607.0502 and 607.1518, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered agent 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: *Steven R. Kutner* **STEVEN R. KUTNER** 1/22/96 DATE

12. OFFICERS AND DIRECTORS
12.1 NAME: **PRES KUTNER, STEVEN R.** [] DELETE
12.2 STREET ADDRESS: **202 LOOKOUT PLACE 5110**
12.3 CITY-STATE-ZIP: **MAITLAND FL**
12.4 TITLE: [] DELETE
12.5 NAME: [] DELETE
12.6 STREET ADDRESS: [] DELETE
12.7 CITY-STATE-ZIP: [] DELETE
12.8 TITLE: [] DELETE
12.9 NAME: [] DELETE
12.10 STREET ADDRESS: [] DELETE
12.11 CITY-STATE-ZIP: [] DELETE
12.12 TITLE: [] DELETE
12.13 NAME: [] DELETE
12.14 STREET ADDRESS: [] DELETE
12.15 CITY-STATE-ZIP: [] DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
13.1 TITLE: Change Addition
13.2 NAME: **151 Lookout Place, Suite 110**
13.3 STREET ADDRESS: **Maitland, Florida, 32751**
13.4 CITY-STATE-ZIP: [] Change Addition
13.5 TITLE: [] Change Addition
13.6 NAME: [] Change Addition
13.7 STREET ADDRESS: [] Change Addition
13.8 CITY-STATE-ZIP: [] Change Addition
13.9 TITLE: [] Change Addition
13.10 NAME: [] Change Addition
13.11 STREET ADDRESS: [] Change Addition
13.12 CITY-STATE-ZIP: [] Change Addition
13.13 TITLE: [] Change Addition
13.14 NAME: [] Change Addition
13.15 STREET ADDRESS: [] Change Addition
13.16 CITY-STATE-ZIP: [] Change Addition

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.

SIGNATURE: *Steven R. Kutner* **Steven R. Kutner** 1/22/96 407-644-1104
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE PHONE NUMBER

CR2E034 (12/95)