

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

PROFIT CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **V74190** (2)

1. Corporation Name
BARNETT, HILL, BARNARD & NEALE, P.A.



Principal Place of Business: **800 SOUTHEAST THIRD AVENUE SUITE 200 FORT LAUDERDALE FL 33316**
Mailing Address: **800 SOUTHEAST THIRD AVENUE SUITE 200 FORT LAUDERDALE FL 33316**

3. Date Incorporated or Qualified: **10/26/1992** 3a. Date of Last Report: **01/26/1995**
4. FEI Number: **65-0364677** Applied For: 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

2. Principal Place of Business: 21, 22, 23, 24
2a. Mailing Address: 26, 27, 28, 29, 30
9. Name and Address of Current Registered Agent

**HILL, SAMUEL T
800 SOUTHEAST THIRD AVENUE
SUITE 200
FORT LAUDERDALE FL 33316**

81 Name
82 Street Address (P.O. Box Numbers Not Acceptable)
83
84 City, **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.02 and 607.05, 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. Thereby, accept the appointment as registered agent. I am familiar with, and accept the obligation of, Section 607.05(3), Florida Statutes.

SIGNATURE: *Samuel T. Hill* TITLE: *Registered Agent*

12. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> DELETE
NAME	BARNETT, L K	
STREET ADDRESS	800 S.E. 3RD AVE., SUITE 200	
CITY, ST, ZIP	FORT LAUDERDALE FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	BARNARD, STEVEN M	
STREET ADDRESS	19 W. FLAGLER ST. S-1003	
CITY, ST, ZIP	MIAMI FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	HILL, SAMUEL T	
STREET ADDRESS	800 S.E. 3RD AVENUE SUITE 200	
CITY, ST, ZIP	FORT LAUDERDALE FL	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	NEALE, THOMAS E	
STREET ADDRESS	800 S.E. 3RD AVENUE SUITE 200	
CITY, ST, ZIP	FORT LAUDERDALE FL	
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

11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	
13 STREET ADDRESS	
14 CITY, ST, ZIP	
21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	
23 STREET ADDRESS	
24 CITY, ST, ZIP	
31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	
33 STREET ADDRESS	
34 CITY, ST, ZIP	
41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	
43 STREET ADDRESS	
44 CITY, ST, ZIP	
51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	
53 STREET ADDRESS	
54 CITY, ST, ZIP	
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	
63 STREET ADDRESS	
64 CITY, ST, ZIP	

14. I do hereby certify that the information supplied with this filing voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(a), 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 this corporation or the trustee or trustee empowered to file this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or in an affidavit filed with this address.

SIGNATURE: *A. T. Hill* 3/24/96 954-462 3623
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)