

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

FILED
Jan 25 1996 8:00 am
Secretary of State

DOCUMENT # 233840 (8)

1. Corporation Name

POST, BUCKLEY, SCHUH & JERNIGAN, INC.

Principal Place of Business

% 2001 N.W. 107 AVENUE
MIAMI FL 33172-2507

Mailing Address

% 2001 N.W. 107 AVENUE
MIAMI FL 33172-2507

3. Date Incorporated or Qualified
02/29/1960

3a. Date of Last Report
01/03/1995

2. Principal Place of Business

21 Subst. Apt. #, etc.

22 City & State

23 Zip Country

24

2a. Mailing Address

26 Subst. Apt. #, etc.

27 City & State

28 Zip Country

29 30

4. FEI Number
59-0896138

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

9. Name and Address of Current Registered Agent

SCHAFFER, BECKY S., ESQ.
2001 N.W. 107 AVENUE
MIAMI FL 33172

10. Name and Address of New Registered Agent

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 of Registered Agent (if not the same as the person filing)

Signature of Registered Agent (signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

NAME	CD	☐ DELETE
NAME	RANDOLPH, WILLIAM W.	
STREET ADDRESS	26 HUNTING LODGE DR	
CITY, ST, ZIP	MIAMI SPRINGS FL	
TITLE	VS	☐ DELETE
NAME	GRUBEL, RICHARD M	
STREET ADDRESS	738 NW 6TH ST	
CITY, ST, ZIP	BOCA RATON FL	
TITLE	VD	☐ DELETE
NAME	TWIDDY, DAVID A	
STREET ADDRESS	6004 TWIN LAKES LN	
CITY, ST, ZIP	OVIEDO FL	
TITLE	VD	☐ DELETE
NAME	SHEARER, JOHN S	
STREET ADDRESS	1917 WINGFIELD DR	
CITY, ST, ZIP	LONGWOOD FL	
TITLE	VD	☐ DELETE
NAME	JENSEN, EDWARD C	
STREET ADDRESS	164 DARTMOUTH LN	
CITY, ST, ZIP	LONGWOOD FL	
TITLE	VS	☐ DELETE
NAME	DELOACH, W. SCOTT	
STREET ADDRESS	2001 N.W. 107 AVE.	
CITY, ST, ZIP	MIAMI FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	☐ Change ☐ Addition
12 NAME	
13 STREET ADDRESS	
14 CITY, ST, ZIP	
2. TITLE	☐ Change ☐ Addition
22 NAME	
23 STREET ADDRESS	
24 CITY, ST, ZIP	
3. TITLE	☐ Change ☐ Addition
32 NAME	
33 STREET ADDRESS	
34 CITY, ST, ZIP	
4. TITLE	☐ Change ☐ Addition
42 NAME	
43 STREET ADDRESS	
44 CITY, ST, ZIP	
5. TITLE	☐ Change ☐ Addition
52 NAME	
53 STREET ADDRESS	
54 CITY, ST, ZIP	
6. TITLE	☒ Change ☐ Addition
62 NAME	
63 STREET ADDRESS	
64 CITY, ST, ZIP	

14. I 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 or 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:

W. Scott DeLoach, Asst. Secretary

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/15/96

305-592-7225

Date

Daytime Phone #

CR2E034 (12/95)