FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT **1996**

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

DOCUMENT # **K09881** **(9)**

1. Corporation Name
SCHULTZ AND COLLMAN ARCHITECTS, P.A.

Principal Place of Business
748 BROADWAY
DUNEDIN FL 34698

Mailing Address
748 BROADWAY
DUNEDIN FL 34698

3. Date Incorporated or Qualified: **12/31/1987**
3a. Date of Last Report: **05/26/1995**

2. Principal Place of Business
21 303 MAIN STREET
Suite, Apt. #, etc.
22
City & State
23 DUNEDIN FL
Zip
24 34698
Country
25

2a. Mailing Address
26 303 MAIN STREET
Suite, Apt. #, etc.
27
City & State
28 DUNEDIN FL
Zip
29 34698
Country
30

4. FEI Number: **59-2863830** 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
COLLMAN, RODNEY L
303 MAIN STREET
DUNEDIN FL 34698

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 required for printed name of new registered agent in the application. (If the Registered Agent is an organization, the signature must be that of an officer or director of the registered agent.) DATE

12. OFFICERS AND DIRECTORS

TITLE	PVST	☐ DELETE
NAME	COLLMAN, RODNEY L	
STREET ADDRESS	303 MAIN ST.	
CITY-ST-ZIP	DUNEDIN FL	
TITLE	VTD	☐ DELETE
NAME	COLLMAN, RODNEY L.	
STREET ADDRESS	303 MAIN ST	
CITY-ST-ZIP	DUNEDIN FL	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

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

14. I do hereby certify that the information s[illegible] 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 t[illegible] 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 t[illegible] 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 c[illegible] with an address.

SIGNATURE: [illegible] 4/25/96 813-733-0491
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE Daytime Phone #

CR2E034 (12/95)