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Jan 22 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # 550167 (1)
1. Corporation Name
TRENAM, KEMKER, SCHARF, BARKIN, FRYE, O'NEILL &
MULLIS, PROFESSIONAL ASSOCIATION

Principal Place of Business Mailing Address
101 E.KENNEDY BLVD.2700 BARNETT PLZ 101 E.KENNEDY BLVD.2700 BARNETT PLZ
P.O.BOX 1102 P.O.BOX 1102
TAMPA FL 33602 TAMPA FL 33602-5170



3. Date Incorporated or Qualified 10/28/1977 3a. Date of Last Report 04/02/1996
4. FEI Number 59-1772042 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

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip 28 Country 29 Zip 30 Country

9. Name and Address of Current Registered Agent

MULLIS, HAROLD W.
101 E KENNEDY BLVD
TAMPA FL 33602

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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS
TITLE VTD ☐ DELETE
NAME BARKIN, MARVIN E
STREET ADDRESS 101 E.KENNEDY BLVD.
CITY-ST-ZIP TAMPA, FL 00000
TITLE PD ☐ DELETE
NAME MULLIS, JR. H
STREET ADDRESS 101 E KENNEDY BLVD
CITY-ST-ZIP TAMPA, FL 00000
TITLE VSD ☐ DELETE
NAME O'NEILL JR, ALBERT C
STREET ADDRESS 101 E.KENNEDY BLVD.
CITY-ST-ZIP TAMPA, FL 00000
TITLE VD ☐ DELETE
NAME FRYE, WILLIAM C.
STREET ADDRESS 101 E.KENNEDY BLVD.
CITY-ST-ZIP TAMPA FL
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 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]* Date 1/14/97 813-223-7474
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #

CR2E034 (9/96)