

**FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00**

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

0574395

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 233840

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

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 02/29/1960  
4. FEI Number: 59-0896138  
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 owes the current year Intangible Personal Property Tax:  Yes  No

2. Principal Place of Business (21-24) and Mailing Address (25-30) fields with sub-headers for Suite, City & State, Zip, and Country.

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 (81-85) fields for Name, Street Address, City, and 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: \_\_\_\_\_ DATE: \_\_\_\_\_

12. OFFICERS AND DIRECTORS

TITLE	CD	<input type="checkbox"/> DELETE
NAME	RANDOLPH, WILLIAM W.	
STREET ADDRESS	26 HUNTING LODGE DR	
CITY-ST-ZIP	MIAMI SPRINGS FL	
TITLE	VS	<input type="checkbox"/> DELETE
NAME	GRUBEL, RICHARD M	
STREET ADDRESS	738 NW 6TH ST	
CITY-ST-ZIP	BOCA RATON FL	
TITLE	VD	<input type="checkbox"/> DELETE
NAME	WICKETT, RICHARD A	
STREET ADDRESS	7605 NW 71ST TERR	
CITY-ST-ZIP	PARKLAND FL	
TITLE	PD	<input type="checkbox"/> DELETE
NAME	DYE, MICHAEL H	
STREET ADDRESS	16115 W PRESTWICK PL	
CITY-ST-ZIP	MIAMI LAKES FL	
TITLE	VD	<input type="checkbox"/> DELETE
NAME	ZUMWALT, JOHN B	
STREET ADDRESS	3085 EDGEMOOR DR	
CITY-ST-ZIP	PALM HARBOR FL	
TITLE	VS	<input type="checkbox"/> 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

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	300002749313--5
2.4 CITY-ST-ZIP	-01/21/99--01038--020
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	***158.75 ***158.75
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I 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, with all other like empowered.

SIGNATURE: *W. Scott DeLoach* F. RIN. SCOTT DELOACH, SR Vice-President 1/14/99 (305) 592-7275

CR2E034 (1/198)