

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 APR 27 AM 8:45

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **339717** (1)
1. Corporation Name
FLORIDA ASSOCIATED SERVICES, INC.

Principal Place of Business Mailing Address
76 SOUTH LAURA STREET JACKSONVILLE FL 32202

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **12/31/1968** 3a. Date of Last Report **04/11/1994**
4. FEI Number **59-1227335** 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 **1776 American Heritage Life** 26 **1776 American Heritage Life**
Suite, Apt. #, etc. Suite, Apt. #, etc.
22 **Drive** 27 **Drive**
City & State City & State
23 **Jacksonville, Florida** 28 **Jacksonville, Florida**
Zip Country Zip Country
24 **32224-6688** 25 **USA** 29 **32224-6688** 30 **USA**

9. Name and Address of Current Registered Agent
VERLANDER, CHRIS A.
76 SOUTH LAURA STREET
JACKSONVILLE FL 32202

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
1776 American Heritage Life Drive
83
84 City **Jacksonville** FL 85 Zip Code **32224-6688**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits the 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 _____ (NOTE: Registered Agent signature required when changing) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE D	NAME VERLANDER, W ASHLEY STREET ADDRESS 76 SOUTH LAURA STREET CITY, ST, ZIP JACKSONVILLE, FL 00000	1.1 TITLE delete	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE TD	NAME MOREHEAD, C. RICHARD STREET ADDRESS 76 SOUTH LAURA STREET CITY, ST, ZIP JACKSONVILLE, FL 00000	2.1 TITLE 1776 American Heritage Life Drive 2.2 NAME Jacksonville, Florida 32224-6688	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE PSD	NAME VERLANDER, CHRIS A STREET ADDRESS 76 SOUTH LAURA STREET CITY, ST, ZIP JACKSONVILLE, FL 00000	3.1 TITLE 1776 American Heritage Life Drive 3.2 NAME Jacksonville, Florida 32224-6688	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE S	NAME FURTICK, RUSSELL H. STREET ADDRESS 76 SOUTH LAURA STREET CITY, ST, ZIP JACKSONVILLE, FL 00000	4.1 TITLE 1776 American Heritage Life Drive 4.2 NAME Jacksonville, Florida 32224-6688	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE CD	NAME DOUGLAS, T. O'NEAL STREET ADDRESS 76 SOUTH LAURA STREET CITY, ST, ZIP JACKSONVILLE, FL 00000	5.1 TITLE 1776 American Heritage Life Drive 5.2 NAME Jacksonville, Florida 32224-6688	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE D	NAME Heidin, W. Michael STREET ADDRESS 1776 American Heritage Life Drive CITY, ST, ZIP Jacksonville, Florida 32224-6688	6.1 TITLE D 6.2 NAME Heidin, W. Michael 6.3 STREET ADDRESS 1776 American Heritage Life Drive 6.4 CITY, ST, ZIP Jacksonville, Florida 32224-6688	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(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 empowered to execute this report as required by Chapter 007, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on any attached form with an address.

SIGNATURE: *Christopher A. Verlander* **CHRISTOPHER A. VERLANDER** 4/25/95 (904) 992-1716