

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 # **455494** (5)

1. Corporation Name
ULMER, MURCHISON, ASHBY & TAYLOR, P.A.



Principal Place of Business Mailing Address
200 W FORSYTH ST #1600 P.O. BOX 479 JACKSONVILLE FL 32201

3. Date Incorporated or Qualified 06/26/1974	3a. Date of Last Report 01/31/1995
4. FEI Number 59-1704144	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

21. Principal Place of Business Suite, Apt. #, etc.	22. City & State	23. Zip	24. Country	25. Mailing Address Suite, Apt. #, etc.	26. City & State	27. Zip	28. Country	29. Mailing Address Suite, Apt. #, etc.	30. City & State	31. Zip	32. Country
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9. Name and Address of Current Registered Agent

**STEWART, CARL M
200 W FORSYTH ST #1600
200 WEST FORSYTH STREET
JACKSONVILLE 32202**

10. Name and Address of New Registered Agent

81. Name	82. Street Address (P.O. Box Number is Not Acceptable)	83.	84. City	85. Zip Code
			FL	

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 officer or director (if registered agent, if applicable)

NOTE: Registered Agent signature required when reinstating

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
NAME	PVD KELLY, EDWARD L	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	1600 SUN BANK BLD. JACKSONVILLE FL	1.2 NAME	
CITY-ST-ZIP	JACKSONVILLE FL	1.3 STREET ADDRESS	
TITLE	V	1.4 CITY-ST-ZIP	
NAME	TAYLOR, JAMES S	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	1600 SUN BANK BLD. JACKSONVILLE FL	2.2 NAME	
CITY-ST-ZIP	JACKSONVILLE FL	2.3 STREET ADDRESS	
TITLE	V	2.4 CITY-ST-ZIP	
NAME	LEE, LEWIS	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	1600 SUN BANK BLD. JACKSONVILLE FL	3.2 NAME	
CITY-ST-ZIP	JACKSONVILLE FL	3.3 STREET ADDRESS	
TITLE	V	3.4 CITY-ST-ZIP	
NAME	WHITEFIELD, B. THOMAS	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	1600 SUN BANK BLD. JACKSONVILLE FL	4.2 NAME	
CITY-ST-ZIP	JACKSONVILLE FL	4.3 STREET ADDRESS	
TITLE	VD	4.4 CITY-ST-ZIP	
NAME	SCHEU, WILLIAM E.	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	1600 SUN BANK BLD. JACKSONVILLE FL	5.2 NAME	
CITY-ST-ZIP	JACKSONVILLE FL	5.3 STREET ADDRESS	
TITLE	SVD	5.4 CITY-ST-ZIP	
NAME	STEWART, CARL M	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	1600 SUN BANK BLD., 200 WEST FORSYTH ST JACKSONVILLE FL	6.2 NAME	
CITY-ST-ZIP	JACKSONVILLE FL	6.3 STREET ADDRESS	
		6.4 CITY-ST-ZIP	

(CONTINUED ON ATTACHED SHEET)

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 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 empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13, changed, or on an attachment with an address.

SIGNATURE: *Carl M Stewart*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/25/96
904
354-9000
Date Daytime Phone #

CR2E034 (12/95)

ATTACHMENT TO ANNUAL REPORT 1996
for ULMER, MURCHISON, ASHBY & TAYLOR

<u>Name of Officers and Directors</u>	<u>Title</u>	<u>Address</u>
John W. Mooers	V	1600 Sun Bank Building 200 West Forsyth Street P. O. Box 479 Jacksonville, FL 32201
John S. Duss	V/D	Same
Douglas H. Morford	V/D	Same
Clarence H. Houston, Jr.	V	Same
Edward W. Lane, III	V	Same
Lori E. Terens	V	Same
William L. Joel	V	Same
Edmond M. Feeks	T	Same