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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ANNUAL REPORT
1995

DOCUMENT # 460223 (1)

1. Corporate Name

CRARY, BUCHANAN, BOWDISH, BOVIE, LORD, ROBY & EVANS, CHARTERED

Principal Place of Business	Mailing Address
555 COLORADO AVE. #1 P.O. DRAWER 24 STUART FL 34994	555 COLORADO AVE. #1 P.O. DRAWER 24 STUART FL 34994

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 08/27/1974
3a. Date of Last Report: 04/13/1994

2. Principal Place of Business — 21:
2a. Mailing Address — 26:
Suite, Apt. #, etc. — 22:
Suite, Apt. #, etc. — 27:
City & State — 23:
City & State — 28:
Zip — 24: Country — 25:
Zip — 29: Country — 30:

4. FEI Number: 59-1548347 ☐ 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

BUCHANAN, LARRY E.
555 COLORADO AVE. #1
STUART FL

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

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	VD	11 TITLE	VD	☐ Change ☒ Addition
NAME	ROBY, WILLIAM L	12 NAME	James L.S. Bowdish	
STREET ADDRESS	3522 SE COURT DR	13 STREET ADDRESS	471 N.E. Town Terrace	
CITY-ST-ZIP	STUART FL	14 CITY-ST-ZIP	Jensen Beach, FL 34957	
TITLE	VD	21 TITLE	VD	☐ Change ☒ Addition
NAME	LORD, ROBERT L	22 NAME	George F. Bovie III	
STREET ADDRESS	4316 NE SUNSET DR	23 STREET ADDRESS	3515 S.W. Aspen Place	
CITY-ST-ZIP	JENSEN BEACH FL	24 CITY-ST-ZIP	Palm City, FL 34990	
TITLE	VD	31 TITLE	VD	☐ Change ☒ Addition
NAME	EVANS, MARSHALL L	32 NAME	Steven D. Beres	
STREET ADDRESS	1540 NW FORK RD	33 STREET ADDRESS	3716 S.W. Sunset Trace Circle	
CITY-ST-ZIP	STUART FL	34 CITY-ST-ZIP	Palm City, FL 34990	
TITLE	VD	41 TITLE		☐ Change ☐ Addition
NAME	CRARY, WILLIAM F II	42 NAME		
STREET ADDRESS	3242 SE ASTOR LN L232	43 STREET ADDRESS		
CITY-ST-ZIP	STUART FL	44 CITY-ST-ZIP		
TITLE	PTD	51 TITLE		☐ Change ☐ Addition
NAME	BUCHANAN, LARRY E	52 NAME		
STREET ADDRESS	1849 NW RIVER TRIAL	53 STREET ADDRESS		
CITY-ST-ZIP	STUART FL	54 CITY-ST-ZIP		
TITLE	VSD	61 TITLE		☐ Change ☐ Addition
NAME	CRARY, LAWRENCE E. III	62 NAME		
STREET ADDRESS	3730 SW WOODBRIAR LN	63 STREET ADDRESS		
CITY-ST-ZIP	PALM CITY FL	64 CITY-ST-ZIP		

14. I declare I certify that the information supplied with this filing is voluntarily furnished and 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: Lawrence E. Crary III Vice President 1/13/95 (407) 287-2600
SIGNATURE AND TYPED OR PRINTED NAME OF OFFICER OR DIRECTOR — Title — Date — Daytime Phone #

0300400 CP