

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

FILED

Apr 23 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 # 460223

(1)

1. Corporation Name

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

Principal Place of Business

555 COLORADO AVE. #1
P.O. DRAWER 24
STUART FL 34994

Mailing Address

555 COLORADO AVE. #1
P.O. DRAWER 24
STUART FL 34994-3006



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

24 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

3. Date Incorporated or Qualified

08/27/1974

3a. Date of Last Report

03/25/1996

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

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 ☐ DELETE
NAME VD
STREET ADDRESS BOWDISH, JAMES L S
CITY-ST-ZIP 471 NE TOWN TERRACE
JENSEN BEACH FL

TITLE ☐ DELETE
NAME VD
STREET ADDRESS LORD, ROBERT L
CITY-ST-ZIP 4316 NE SUNSET DR
JENSEN BEACH FL

TITLE ☐ DELETE
NAME VD
STREET ADDRESS BOVIE, GEORGE F III
CITY-ST-ZIP 3515 SW ASPEN PLACE
PALM CITY FL

TITLE ☐ DELETE
NAME VD
STREET ADDRESS CRARY, WILLIAM F II
CITY-ST-ZIP 3242 SE ASTOR LN L232
STUART FL

TITLE ☐ DELETE
NAME PTD
STREET ADDRESS BUCHANAN, LARRY E
CITY-ST-ZIP 1849 NW RIVER TRAIL
STUART FL

TITLE ☐ DELETE
NAME VSD
STREET ADDRESS CRARY, LAWRENCE E. III
CITY-ST-ZIP 3730 SW WOODBRIAR LN
PALM CITY FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE ☐ Change ☐ Addition
12 NAME
13 STREET ADDRESS
14 CITY-ST-ZIP

21 TITLE ☐ Change ☐ Addition
22 NAME
23 STREET ADDRESS
24 CITY-ST-ZIP

31 TITLE ☐ Change ☐ Addition
32 NAME
33 STREET ADDRESS
34 CITY-ST-ZIP

41 TITLE ☐ Change ☐ Addition
42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP

51 TITLE ☐ Change ☐ Addition
52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP

61 TITLE ☐ Change ☐ Addition
62 NAME
63 STREET ADDRESS
64 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: *Lawrence E. Crary III*

2/14/97 (561) 287-2600

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/96)