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

PROFIT CORPORATION ANNUAL REPORT

1997

CITY-ST-7IP

appears in Block 12 or Block

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

FILED

Feb 10 1997 8:00am

Secretary of State

R ARBONIO BODIO BODIO ALBONI RADIO ARBONI IBNI BODIO GIBRA BEGRA BERRA BODIO BODIO ILGO

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 541899

(1)

DONALD B. PATE & ASSOCIATES, INC.

Principal Place of Business Mailing Address									1 2 1 4 1 4 1 4 1 1 1 1	***************************************
337 E. ROBERT BRANDON FL (337 E. ROBERTSON ST. BRANDON FL 33511-5253							•
							3. Date Incorporated or Qualified 08/01/1977		Date of Last Re 2/13/1996	eport
2. Principal Pla	ace of Business	2a. Mailing	2a. Mailing Address				4. FEI Number Applied For			
21		26	26				59-1756517 Not Applicable			
Suite, Apt 4	f, etc	27					5. Certificate of Status Desired	ree nadules		
City & State		28					6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
Zip Country		Zip					8. This corporation has liability for intangible tax unde			. 199.032,
24	25 29 29 3. Name and Address of Current Registered Agent			30	Florida Statutes 10. Name and Address of New Re			Yes No		
		urrent Hegistered Ag	ent		81	Name	10. Name and Address of New P	egistered	Agent	
	e, donald B.				٠.	INDITIO				
	E. ROBERTSON ST.				82	Street Addr	dress (P.O. Box Number is Not Acceptable)			
BKA	NDON FL 33511			}	83					
					84	City			85 Zip (Code
						City		Fl		
office or re	o the provisions of Sections 60 egistered agent, or both, in the n familiar with, and accept the	State of Florida, Such	change was a	authorized	l by	the corporat	oration submits this statement for the ion's board of directors. I hereby acc	purpose of ept the ap	of changing it pointment as	is registered registered
SIGNATURE									<u> </u>	
	Signature, lyped or projed name of registe		e. (NOI		Age	nt signature requir	ed when reinstating) ADDITIONS/CHANGES TO OFF	DATE	ID DIDECTOR	C IN 12
12.		IS AND DIRECTORS	DELETE	13.		<u> </u>	ADDITIONS/CHANGES TO OFF	VENS AN	Change	Addition
TIFLE	PD Pate, Donald B.	·	L., DELEVE	12 N					Change.	
NAME	120 GOLDENWOOD					ADDRESS				
STREET ADDRESS	BRANDON FL			1.4 CI						
CITY - ST - ZIP TITLE	VPD		DELETE	2.1 TI		14 217			Change	Addition
NAME	PATE, RACHEL B.				2.2 NAME					
STREET ADDRESS	120 GOLDENWOOD					ADDRESS				
CITY-S1-7IP	BRANDON FL			2.4C				1		
TITLE	DIV 410 011 1 -		DELETE	3.1 TC					☐ Change	Addition
NAME				3.2 NA	ME	ĺ				·
STREET ADDRESS				3.3 \$1	REET	ADDRESS				
CiTY+ST+ZIP				3 4. C	ITY-S	ST-ZIP				
TITLE			☐ D£LETE	4.1 TI	TLE				☐ Change	Addition
NAME				4.2 N	AME					
STREET ADDRESS				4.3 ST	REET	ADDRESS				
CITY-S1-ZIP				4.4 CI	TY-S	T-ZIP				
TITLE			DELETE	5.1 T U	TLE				Change	Addition
NAME				5.2 N/	WE					
STREET ADDRESS				5.3 S1	REET	ADDRESS				
CITY-SI-ZIP				5.4 C		T-ZIP				
TITLE			DELETE	6.1 Ti	TLE	-			Change	Addition
NAME				6.2 N	AME	1				
STREET ADDRESS				6351	REET	ADDRESS				

64 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this angular 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

DONALD B. PATE

changed, or on an attachment with an address