

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 APR 18 PM 5:02

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 544765 (1)

1. Corporation Name

RISSMAN, WEISBERG, BARRETT, HURT, DONAHUE & MC
LA IN, P.A.

Principal Place of Business

201 EAST PINE STREET, 15TH FLOOR
ORLANDO FL 32801

Mailing Address

201 EAST PINE STREET, 15TH FLOOR
ORLANDO FL 32801

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/08/1977

3a. Date of Last Report

02/01/1994

4. FEI Number

59-1759654

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing

☐ \$5.00 May Be
Added to Fees

7. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

RISSMAN, STEVEN A.
201 EAST PINE STREET
15TH FLOOR
ORLANDO FL 32801

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83 15TH FLOOR

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 registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE	PD
NAME	RISSMAN, STEVEN A.
STREET ADDRESS	201 E PINE STR 15 FLOOR
CITY - ST - ZIP	ORLANDO FL
TITLE	VD
NAME	WEISBERG, RICHARD H.
STREET ADDRESS	201 E PINE STR 15 FLOOR
CITY - ST - ZIP	ORLANDO FL
TITLE	SD
NAME	BARRETT, ROBERT C
STREET ADDRESS	201 E PINE STR 15 FLOOR
CITY - ST - ZIP	ORLANDO, FL 00000
TITLE	TM
NAME	HURT, JENNINGS L III
STREET ADDRESS	201 E PINE STR 15 FLOOR
CITY - ST - ZIP	ORLANDO FL
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	☐ Change ☒ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	32801
2.1 TITLE	☐ Change ☒ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	32801
3.1 TITLE	☒ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	32801
4.1 TITLE	☐ Change ☒ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	32801
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

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, as required, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JENNINGS L. HURT III

2-13-95

407-839-0120

(Date)

Telephone Number