

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 571366 (4)

1. Corporation Name

FLORIDA MUNICIPAL ADVISORS, INC.



Principal Place of Business

9121 NO MILITARY TR
STE 200
PALM BCH GDNS FL 33410
US

Mailing Address

9121 NO MILITARY TR
STE 200
PALM BCH GDNS FL 33410
US

3. Date Incorporated or Qualified

05/09/1978

3a. Date of Last Report

06/26/1995

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number

59-1848466

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

10. Name and Address of New Registered Agent

BENNETT, CLARK
9121 N MILITARY TRAIL
SUITE 200
PALM BEACH GARDENS FL 33410

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 (if applicable)

Signature typed or printed name of new registered agent (if applicable)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PST
NAME GORT, WIFREDO
STREET ADDRESS 9121 N MILITARY TRAIL SUITE 200
CITY-STATE-ZIP PALM BCH GARDENS FL

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-STATE-ZIP

TITLE SVPO
NAME BURDETTE, WILLIAM R
STREET ADDRESS 9121 N MILITARY TRAIL SUITE 200
CITY-STATE-ZIP PALM BCH GARDENS FL

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-STATE-ZIP

TITLE VP
NAME BENNETT, CLARK
STREET ADDRESS 9121 N MILITARY TRAIL STE 200
CITY-STATE-ZIP PALM BEACH GARDENS FL

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-STATE-ZIP

TITLE VP
NAME BRANDT, DAVID
STREET ADDRESS 9121 N MILITARY TRAIL STE 200
CITY-STATE-ZIP PALM BEACH GA

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-STATE-ZIP

TITLE VP
NAME ANDERSEN, QUANTELLA
STREET ADDRESS 9121 N MILITARY TRAIL STE 200
CITY-STATE-ZIP PALM BEACH GARDENS FL

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-STATE-ZIP

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-STATE-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 or changed, or on an attachment with an address

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4-29-96 (305) 372-8000

CR2E034 (12/95)