

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 601031 (8)

1. Corporation Name

JOHN F. RIGG, JR., P.A.

Principal Place of Business

171 NORTH RIVER DR. EAST
JUPITER FL 33458-3768
US

Mailing Address

171 NORTH RIVER DR. EAST
JUPITER FL 33458-3768
US



2. Principal Place of Business

21 278 GOLFVIEW DR.
Suite, Apt. #, etc.

2a. Mailing Address

26 278 GOLFVIEW DR.
Suite, Apt. #, etc.

22 TEQUESTA, FLA
City & State

27 TEQUESTA, FLA
City & State

23 33469-1942
Zip Country

28 33469-1942
Zip Country

24 25 29 30

9. Name and Address of Current Registered Agent

RIGG JR, JOHN F
171 NORTH RIVER DR EAST
JUPITER FL 33458

3. Date Incorporated or Qualified

05/27/1969

3a. Date of Last Report

01/26/1995

4. FEI Number

59-1261934

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

10. Name and Address of New Registered Agent

81 Name

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

83 278 GOLFVIEW DR.
TEQUESTA, FLA 33469-1942

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 607.05, Florida Statutes.

SIGNATURE

John F. Rigg Jr. PA

(NOTE: Registered Agent signature required when reappointing)

1-1996

DATE

12. OFFICERS AND DIRECTORS

☐ DELETE

TITLE PD
NAME RIGG JR, JOHN F
STREET ADDRESS 171 NORTH RIVER DR EAST
CITY-ST-ZIP JUPITER FL

☐ DELETE

TITLE D
NAME RIGG, GAIL R
STREET ADDRESS 171 NORTH RIVER DR EAST
CITY-ST-ZIP JUPITER FL

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☒ Change ☐ Addition

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

278 GOLFVIEW DR.
TEQUESTA, FLA 33469

☒ Change ☐ Addition

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

278 GOLFVIEW DR.
TEQUESTA, FLA 33469

☐ Change ☐ Addition

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

☐ Change ☐ Addition

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

☐ Change ☐ Addition

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

☐ Change ☐ Addition

6.1 TITLE
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 if changed, or in an attachment with an address.

SIGNATURE:

John F. Rigg Jr. PA
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date:

Daytime Phone #

1-17-96 407-745 0052

CR2E034 (12/95)