

AMENDED

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

AMENDED PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name

Levin, Middlebrooks, Thomas, Mitchell, Green, Echsner, Proctor & Papantonio, P.A.

Principal Place of Business

Mailing Address

316 S. Baylen St.  
Suite 600  
P.O. Box 12308  
Pensacola, FL 32581

316 S. Baylen Street  
Suite 600  
P.O. Box 12308  
Pensacola, FL 32581

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

C. Flack Logan  
Levin, Middlebrooks, et.al.  
316 S. Baylen St., Ste 600  
Pensacola, FL 32501

81 Name

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

83

84 City

FL

85 Zip Code

3. Date Incorporated or Qualified

06/26/1969

4. FEI Number

59-1266412

Applied For

Not Applicable

5. Certificate of Status Desired

xx

\$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution

□

\$5.00 May Be Added to Fees

8. This corporation owes the current year Intangible Personal Property Tax

□ Yes

□ No

10. Name and Address of New Registered Agent

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)

C. Flack Logan 07 July 99

DATE

12. OFFICERS AND DIRECTORS

TITLE President ☒ DELETE

NAME Martin H. Levin

STREET ADDRESS 316 S. Baylen St., Ste. 600

CITY-ST-ZIP Pensacola, FL 32501

TITLE Secretary ☒ DELETE

NAME C. Flack Logan

STREET ADDRESS 316 S. Baylen St., Ste. 600

CITY-ST-ZIP Pensacola, FL 32501

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

President

Mark J. Proctor

316 S. Baylen St., Ste. 600

Pensacola, FL 32501

Secretary

Leo A. Thomas

316 S. Baylen St., Ste. 600

Pensacola, FL 32501

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\*\*\*\*\*70.00 \*\*\*\*\*70.00

□ Change

□ Addition

□ Change

□ Addition

□ Change

□ Addition

14. I 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, with all other like empowered.

SIGNATURE:

*Leo A. Thomas*

Leo A. Thomas, Secretary 07/07/1999 (850) 435-7000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (1/198)

SP