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FILED

Jan 15 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # 602200 (8)

1. Corporation Name  
GURNEY & HANDLEY, P.A.

Principal Place of Business

225 E. ROBINSON  
SUITE 450  
ORLANDO FL 32801  
US

Mailing Address

225 E. ROBINSON  
P.O. BOX 1273 SUITE 450  
ORLANDO FL 32802-1273  
US



3. Date Incorporated or Qualified

06/25/1970

3a. Date of Last Report

01/31/1996

4. FEI Number

59-1285954

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

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

GREEN, ROBERT S.  
225 E. ROBINSON  
ORLANDO FL 32801

10. Name and Address of New Registered Agent

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 or director if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE VPD  
NAME SEWELL, JOHN L  
STREET ADDRESS 225 E. ROBINSON  
CITY-ST-ZIP ORLANDO, FL 00000

☐ DELETE

TITLE SD  
NAME GREEN, ROBERT S  
STREET ADDRESS 225 E. ROBINSON  
CITY-ST-ZIP ORLANDO, FL 00000

☐ DELETE

TITLE TD  
NAME SMITH, PETER N  
STREET ADDRESS 225 E. ROBINSON  
CITY-ST-ZIP ORLANDO, FL 00000

☐ DELETE

TITLE PD  
NAME HANDLEY, LEON H  
STREET ADDRESS 225 E. ROBINSON  
CITY-ST-ZIP ORLANDO, FL 00000

☐ DELETE

TITLE VPD  
NAME LASSITER, RICHARD W  
STREET ADDRESS 225 E. ROBINSON  
CITY-ST-ZIP ORLANDO, FL 00000

☐ DELETE

TITLE D  
NAME HARDY, W. MARVIN  
STREET ADDRESS 225 E. ROBINSON  
CITY-ST-ZIP ORLANDO, FL 00000

☐ DELETE

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D  
1.2 NAME DUNEGAN, RICHARD E  
1.3 STREET ADDRESS 225 E. ROBINSON  
1.4 CITY-ST-ZIP ORLANDO, FL 32801

☐ Change ☒ Addition

2.1 TITLE D  
2.2 NAME HARROP, RONALD L  
2.3 STREET ADDRESS 225 E. ROBINSON  
2.4 CITY-ST-ZIP ORLANDO, FL 32801

☐ Change ☐ Addition

3.1 TITLE D  
3.2 NAME PIERCE, III, FRANCIS E  
3.3 STREET ADDRESS 225 E. ROBINSON  
3.4 CITY-ST-ZIP ORLANDO, FL 32801

☐ Change ☐ Addition

4.1 TITLE D  
4.2 NAME ROQUEMORE, DAVID W  
4.3 STREET ADDRESS 225 E. ROBINSON  
4.4 CITY-ST-ZIP ORLANDO, FL 32801

☐ 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

☐ Change ☐ Addition

14. I do 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.

SIGNATURE:

*Robert S. Green*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/6/97

Date

(407) 843-9500

Daytime Phone

CR2E034 (9/96)