FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 APR 13 PM 2:15

DOCUMENT # **602367** **(5)**

1. Corporation Name
MILLOTT, HUNTER & HERMAN, P.A.

Principal Place of Business	Mailing Address
1644 FIRST AVE NORTH ST PETERSBURG FL 33713	1644 FIRST AVE NORTH ST PETERSBURG FL 33713

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 08/31/1970	3a. Date of Last Report: 06/27/1994
4. FEI Number: 59-1301162	☐ 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	

2. Principal Place of Business	2a. Mailing Address
21 1644 First Ave N	26 1644 First Ave N
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23 St Petersburg FL	City & State 28 St Petersburg FL
Zip 24 33713 County 25	Zip 29 33713 County 30

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
HUNTER III,ALBERT B 1644 1ST AVE NO ST. PETERSBURG FL 33713	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 the 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 ✓ Albert B Hunter III 4/10/95
(Signature, Typed or Printed Name of Registered Agent, and Title, if Applicable) (NOTE: Registered Agent signature required when new/changed) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	11 TITLE	☐ Change ☐ Addition
NAME	HUNTER, III ALBERT B	12 NAME	
STREET ADDRESS	1644 1ST AVE N	13 STREET ADDRESS	
CITY ST ZIP	ST PETERSBURG FL	14 CITY ST ZIP	
TITLE	SD	21 TITLE	☐ Change ☐ Addition
NAME	HUNTER, FRANCES B.	22 NAME	
STREET ADDRESS	1644 1ST AVE N	23 STREET ADDRESS	
CITY ST ZIP	ST PETERSBURG FL	24 CITY ST ZIP	
TITLE	D	31 TITLE	☐ Change ☐ Addition
NAME	HUNTER, CHRISTOPHER	32 NAME	
STREET ADDRESS	1644 1ST AVE N	33 STREET ADDRESS	
CITY ST ZIP	ST PETERSBURG FL	34 CITY ST ZIP	
TITLE		41 TITLE	☐ Change ☐ Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY ST ZIP		44 CITY ST ZIP	
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY ST ZIP		54 CITY ST ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY ST ZIP		64 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)(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 added.

SIGNATURE: ✓ Albert B. Hunter III ✓ 4/10 ✓95 822-0545
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0306401 CP