

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

3-1-95 B-11668-C

ANNUAL REPORT  
1995



DEPARTMENT OF REVENUE  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

APPROVED  
AND  
FILED

95 MAR -1 PM 4:29

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # 602370 (9)

BECKETT, BARNHILL AND PETERSEN, P.A.

DO NOT WRITE IN THIS SPACE.

Principal Place of Business	Mailing Address
301 W. CAMINO GARDENS BLVD. PLAZA 2 #102 BOCA RATON FL 33432	301 W. CAMINO GARDENS BLVD. PLAZA 2 #102 BOCA RATON FL 33432

21. Principal Place of Business	2a. Mailing Address
22. State, Apt. #, etc.	26. Suite, Apt. #, etc.
23. City & State	27. City & State
24. Zip	25. Country
29. Zip	30. Country

3. Date Incorporated or Qualified	3a. Date of Last Report
09/01/1970	05/01/1994
4. FBI Number	Applied For
59-1300105	Not Applicable
5. Certificate of Status Desired	\$8.75 Additional Fee Required
<input type="checkbox"/>	
6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
<input type="checkbox"/>	
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

BECKETT, KENNETH L.  
301 W CAMINO GARDENS BLVD  
PLAZA 2, SUITE 102  
BOCA RATON FL 33432

10. Name and Address of New Registered Agent

B1. Name	
B2. Street Address (P.O. Box Number is Not Acceptable)	
B3. City	
B4. City	FL
B5. 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: \_\_\_\_\_ DATE: \_\_\_\_\_

12. OFFICERS AND DIRECTORS

TITLE	PD
NAME	BECKETT, KENNETH
STREET ADDRESS	301 W CAMINO GDS BLVD, PLAZA 2, #102
CITY - ST - ZIP	BOCA RATON, FL 00000
TITLE	SD
NAME	BARNHILL, LAMUEL
STREET ADDRESS	301 W CAMINO GDNS BLVD, PLAZA 2, #102
CITY - ST - ZIP	BOCA RATON, FL 00000
TITLE	VD
NAME	PETERSEN, ROGER
STREET ADDRESS	301 W CAMINO GDNS BLVD, PLAZA 2, #102
CITY - ST - ZIP	BOCA RATON, FL 00000

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11. TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. NAME		
13. STREET ADDRESS		
14. CITY - ST - ZIP		
21. TITLE	VD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
22. NAME	Barnhill, Lamuel	
23. STREET ADDRESS	301 W. Camino Gdns Blvd., Plaza 2, #102	
24. CITY - ST - ZIP	Boca Raton, FL 33432	
31. TITLE	STD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
32. NAME	Petersen, Roger	
33. STREET ADDRESS	301 W. Camino Gdns Blvd., Plaza 2, #102	
34. CITY - ST - ZIP	Boca Raton, FL 33432	

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(5)(A), Florida Statutes. I further certify that the information included 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. 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 on Block 12 or 13 or on an attachment with an address.

SIGNATURE: *[Signature]* K. BECKETT, MD X 2572195(407) 395-0455