

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 # 602747 (8)

1. Corporation Name

PETERSON & CARR, P.A.



Principal Place of Business

358 HUNTERS CROSSING
TALLAHASSEE FL 32312

Mailing Address

358 HUNTERS CROSSING
TALLAHASSEE FL 32312

3. Date Incorporated or Qualified

03/31/1971

3a. Date of Last Report

02/13/1995

2. Principal Place of Business

21 358 Hunters Crossing

2a. Mailing Address

26 358 Hunters Crossing

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

23 Tallahassee, FL.

Zip Country

24 32312 25 USA

City & State

28 Tallahassee, FL.

Zip Country

29 32312 30 U.S.A.

4. FEI Number

59-1350491

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

PETERSON, J. HARDIN
358 HUNTERS CROSSING
TALLAHASSEE FL 32312

10. Name and Address of New Registered Agent

81 Name

Samo

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

J. Hardin Peterson

Signature, typed or printed name of registered agent and the filer is acceptable

(NOTE: If a new agent's signature requires when reinstating)

2/28/96

12. OFFICERS AND DIRECTORS

TITLE PD
NAME PETERSON, J. HARDIN, JR.
STREET ADDRESS 358 HUNTERS CROSSING
CITY-ST-ZIP TALLAHASSEE FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

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NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
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

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 (adding), or on an attachment with an address.

SIGNATURE:

J. Hardin Peterson

2/28/96

904/422-1992

SIGNATURE, TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Telephone #

CR2E034 (12/95)