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PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

CITY-ST-7.P

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

FILED

Mar 10 1997 8:00am

Secretary of State

3/3/97 56/6550670

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 603819

(4)

Mailing Address

THE LAWRENCE GROUP CHARTERED ARCHITECTS AND PLAN NERS, INC.

205 PALM WORTH AVENUE 205 PALM WORTH AVENUE PALM BEACH FL 33480 PALM BEACH FL 33480 3. Date Incorporated or Qualified 3a. Date of Last Report 09/01/1972 01/25/1996 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 59-1410508 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired X Fee Required 27 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution 23 28 Added to Fees Country Zip Country  $Z_{10}$ 8. This corporation has liability for intangible tax under s. 199.032, 25 29 Florida Statutes 24 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name BURMAN, J. MICHAEL, ESQ. 712 US HWY ONE, STE 300 82 Street Address (P.O. Box Number is Not Acceptable) NO. PALM BCH. FL 33408 83 84 City 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 (NOTE: Registered Agent signature required when reinstating) Styrestore, typed or profest name of registered agent and fits if applicable 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. 96/6) (6) DELETE Change Addition Lille 1.1 TITLE LAWRENCE, EUGENE NAME 1.2 NAME 205 PALM WORTH AVENUE STREET ADDRESS 1.3 STREET ADDRESS PALM BEACH FL CHY-ST-ZIP 1.4 CiTY - ST - ZiP DELETE Change Addition Tille 2.1 TITLE ROBINSON, MARY L. NALTE 2.2 NAME 205 PALM WORTH AVENUE STREET ADDRESS 2.3 STREET ADDRESS PALM BEACH FL CHY-SI-ZIF 2.4 CITY-ST-ZIP DELETE Addition Tille 3.1 TITLE Change LAWRENCE, EUGENE NAME 3 2 NAME 205 PALM WORTH AVENUE 3.3 STREET ADDRESS STREET ADDRESS PALM BEACH FL City-St-7/P 3.4. CITY - ST - ZIP □ DELETE THLE 4.1 TITLE ☐ Change Addition 4.2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS CHY-ST-ZIP 4.4 CITY-ST-ZIP Change 1 TLE DELETE 51 TITLE \_\_\_ Addition NAME 5.2 NAME STREET ADDRESS **5.3 STREET ADDRESS** CITY-S1-ZE 5.4 CITY - ST - ZIP DELETE Change Addition LILE 61 TITLE NAME 62 NAME STREET ADDRESS 63 STREET ADDRESS

64 CITY - ST-ZIP

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 direction 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.

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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR