

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

**CORPORATION
ANNUAL REPORT
1995**



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

DOCUMENT # 604132 (1)

1. Corporation Name

BULLOCK, CHILDS, PENDLEY & REED, PROFESSIONAL ASSOCIATION

FILED

95 JAN 23 AM 10:46

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

233 E BAY ST
711 BLACKSTONE BUILDING
JACKSONVILLE FL 32202

Mailing Address

233 E BAY ST
711 BLACKSTONE BUILDING
JACKSONVILLE FL 32202

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

02/01/1973

3a. Date of Last Report

01/20/1994

4. FEI Number

59-1445577

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

21

2a. Mailing Address

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

23

City & State

27

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**BULLOCK, BRUCE S.
233 E BAY ST
STE 711 BLACKSTONE BUILDING
JACKSONVILLE FL 32202**

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 and title if applicable.

(NOTE: Registered Agent signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE

DVP

NAME

BULLOCK, BRUCE S.

STREET ADDRESS

10740 SCOTT MILL ROAD

CITY - ST - ZIP

JACKSONVILLE FL

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE

PD

NAME

CHILDS, W. DOUGLAS

STREET ADDRESS

8169 BLUE JAY LANE

CITY - ST - ZIP

JACKSONVILLE FL

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE

SD

NAME

PENDLEY, MICHAEL C.

STREET ADDRESS

3008 FOREST CIRCLE

CITY - ST - ZIP

JACKSONVILLE FL

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

☒ Change ☐ Addition

TITLE

T

NAME

REED, RONALD E.

STREET ADDRESS

12629 ATTRILL ROAD

CITY - ST - ZIP

JACKSONVILLE FL

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

☒ Change ☐ Addition

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

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 is voluntarily furnished and does not qualify for the exemption stated in Section 190.07(3)(g), 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 007, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with heretofore.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MICHAEL C. PENDLEY

1-13-95

354 0286