**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

APPROVED
AND
FILED

95 MAY -1 PM 2:21

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 637863 (2)

1. Corporate Name

BETTS, ROGERS, SCHENCK & ROADY, C.P.A.'S, A PROF
ESSIONAL ASSOCIATION

Principal Place of Business
104 NORTH MAGNOLIA DR.
TALLAHASSEE FL 32301-2636

Mailing Address
104 NORTH MAGNOLIA DR.
TALLAHASSEE FL 32301-2636

(Not Valid In This Space)

3. Date Incorporated or Qualified: 09/28/1979

3a. Date of Last Report: 04/01/1994

2. Principal Place of Business — 21

2a. Mailing Address — 26

4. FEI Number: 59-1937836 — Applied For / Not Applicable

Suite, Apt. #, etc. — 22

Suite, Apt. #, etc. — 27

5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required

City, State — 23

City, State — 28

6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees

24 25 29 30

8. This corporation has already filed an election for years under Florida Statute ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

BETTS, BEN F, JR
104 NORTH MAGNOLIA DR.
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City: FL 85 Zip Code

11. Having been designated to act as registered agent in the State of Florida, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper performance of my duties.

SIGNATURE

12. OFFICERS AND DIRECTORS

| | |
|---|---|
| TITLE | PD |
| NAME | BETTS, BENJAMIN F., JR. |
| Street Address | 104 NORTH MAGNOLIA DR. |
| City, State | TALLAHASSEE FL |
| TITLE | STD |
| NAME | ROGERS, EDGAR A., JR. |
| Street Address | 104 NORTH MAGNOLIA DR. |
| City, State | TALLAHASSEE FL |
| TITLE | VD |
| NAME | SCHENCK, JOSEPH T. |
| Street Address | 104 NORTH MAGNOLIA DR. |
| City, State | TALLAHASSEE FL |
| TITLE | SD |
| NAME | ROADY, CHRISTOPHER E |
| Street Address | 104 NORTH MAGNOLIA DR |
| City, State | TALLAHASSEE FL |

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS

☐ Change ☐ Add/Del

14. I hereby certify that the information supplied with this report is true and accurate and that this corporation complies with the requirements of Section 607.193, F.S. I further certify that the information indicated on the annual report or supplemental annual report filed pursuant to Section 607.193 F.S. is accurate and that this corporation has the capacity to sue and be sued in the name under which it is doing business in Florida and that any name appearing in Block 1 of Page 1 of this report is an exact and legal name with no additions.

SIGNATURE: 5-1-95 224-4178

SIGNATURE AND TYPED OR PRINTED NAME OF OFFICER OR DIRECTOR

0025967 CP