

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 FEB -3 AM 9:09

DOCUMENT # **667385** (9)

1. Corporation Name

SMITH & WELCH, M. DS., P.A.

Principal Place of Business

110 J.F.K. DRIVE
ATLANTIS FL 33462

Mailing Address

110 J.F.K. DRIVE
ATLANTIS FL 33462

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified **04/01/1980** 3a. Date of Last Report **01/25/1994**

4. FEI Number **59-1982236** 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. 109.032, Florida Statutes Yes No

2. Principal Place of Business		2a. Mailing Address	
21 5503 S. Congress Ave		26 5503 S. Congress Ave	
Suite, Apt. #, etc. 206		Suite, Apt. #, etc. 206	
City & State Atlantis Florida		City & State Atlantis Florida	
Zip 33462	Country Palm Beach	Zip 33462	Country Palm Beach

9. Name and Address of Current Registered Agent

SMITH, FRED R.
110 J.K.F. DRIVE
ATLANTIS FL 33462

10. Name and Address of New Registered Agent

81 Name **Fred R. Smith**

82 Street Address (P.O. Box Number is Not Acceptable) **5503 S. Congress Ave**

83 **Suite 206**

84 City **Atlantis** FL 85 Zip Code **33462**

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]* DATE **1/30/95**

12. OFFICERS AND DIRECTORS

TITLE	V
NAME	WELCH, PATRICK J
STREET ADDRESS	7420 WESTLAKE DR.
CITY-ST-ZIP	W PALM BEACH, FL 00000
TITLE	P
NAME	SMITH, FRED R
STREET ADDRESS	311 FAIRWAY COURT
CITY-ST-ZIP	ATLANTIS, FL 00000
TITLE	S
NAME	COHEN, JAY L
STREET ADDRESS	460 GLENBROOK DR.
CITY-ST-ZIP	ATLANTIS FL
TITLE	T
NAME	ROSENFELD, THOMAS I.
STREET ADDRESS	537 N COUNTRY CLUB DR
CITY-ST-ZIP	ATLANTIS FL
TITLE	
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	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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 110.07(3)(k), Florida Statute. 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 person or persons 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 in an attachment with my address.

SIGNATURE: *[Signature]* DATE **1/30/95** 407964822/