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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAR 24 PM 1:23

DOCUMENT # 671012 (3)

1. Corporation Name
DECKER AND SMITH, P.A.

Principal Place of Business
1375 JACKSON STE. STE 304
FT MYERS FL 33901

Mailing Address
1375 JACKSON STE. STE 304
FT MYERS FL 33901

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 06/02/1980
3a. Date of Last Report: 05/09/1994

2. Principal Place of Business
21 2080 McGregor Blvd.
22 Suite, Apt. #, etc. First Floor
23 City & State Fort Myers, FL
24 Zip 33901 25 Country Lee

2a. Mailing Address
26 P.O. Box 9208
27 Suite, Apt. #, etc.
28 City & State Fort Myers, FL
29 Zip 33902-9208 30 Country Lee

4. FEI Number: 59-1996906 ☐ 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

9. Name and Address of Current Registered Agent

MURPHY, JOANNE
1375 JACKSON ST, STE 304
FT MYERS FL 33901

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable) 2080 McGregor Boulevard
83 First Floor
84 City Fort Myers FL 85 Zip Code 33901

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	☒ Change ☐ Addition
NAME	DECKER, JAMES G.	1.2 NAME	
STREET ADDRESS	1375 JACKSON ST, #304	1.3 STREET ADDRESS	2080 McGregor Blvd., 1st Floor
CITY-ST-ZIP	FT MYERS FL	1.4 CITY-ST-ZIP	Fort Myers, FL, 33901
TITLE	STD	2.1 TITLE	☒ Change ☐ Addition
NAME	SMITH, EUGENE H.	2.2 NAME	
STREET ADDRESS	1375 JACKSON ST, #304	2.3 STREET ADDRESS	2080 McGregor Blvd., 1st Floor
CITY-ST-ZIP	FT MYERS FL	2.4 CITY-ST-ZIP	Fort Myers, FL, 33901
TITLE		3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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)(i), 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 if changed, or on an attachment with any additions.

SIGNATURE: James G. Decker 3/21/95 (813) 332-5502
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

James G. Decker

0440885 FP