

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED

Apr 24 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **678972** (1)

1. Corporation Name
CARL M. MATHISON JR., P.A.

Principal Place of Business **701 Northpoint Parkway**
~~1400 CENTRE PARK BOULEVARD~~
~~SUITE 770~~
~~WEST PALM BEACH FL 33401~~
~~US~~
33407

Mailing Address
1400 CENTRE PARK BOULEVARD
SUITE 770
WEST PALM BEACH FL 33401-7412
US

Same as Place of Business



2. Principal Place of Business 21 701 Northpoint Parkway Suite, Apt. #, etc. 22 Suite 208 City & State 23 West Palm Beach, FL Zip 24 33407 Country 25 US	2a. Mailing Address 26 701 Northpoint Parkway Suite, Apt. #, etc. 27 Suite 208 City & State 28 West Palm Beach FL Zip 29 33407 Country 30 US
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3. Date Incorporated or Qualified 07/09/1980	3a. Date of Last Report 04/10/1996
4. FEI Number 59-2033362	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent
MATHISON, CARL M., JR.
1400 CENTRE PARK BOULEVARD
SUITE 770
WEST PALM BEACH FL 33401
33407

10. Name and Address of New Registered Agent

81 Name Mathison, Carl M., Jr.
82 Street Address (P.O. Box Number is Not Acceptable) 701 Northpoint Parkway
83 Suite Suite 208
84 City W. Palm Beach FL 85 Zip Code 33407

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 607.0508, Florida Statutes.

SIGNATURE *Carl M. Mathison Jr.* **Carl M. Mathison, Jr.** **4-17-97**

12. OFFICERS AND DIRECTORS

TITLE PD	<input type="checkbox"/> DELETE
NAME MATHISON, CARL M.	
STREET ADDRESS 1400 CENTRE PARK BLVD #770	
CITY - ST - ZIP WEST PALM BEACH FL	
TITLE <input type="checkbox"/> DELETE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE <input type="checkbox"/> DELETE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE <input type="checkbox"/> DELETE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE <input type="checkbox"/> DELETE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PD	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME Mathison, Carl M., Jr.	
1.3 STREET ADDRESS 701 Northpoint Parkway, Suite 208	
1.4 CITY - ST - ZIP West Palm Beach, FL 33407	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.1 TITLE	
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 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 an address.

SIGNATURE: *Carl M. Mathison Jr.* **4-17-97** **561-471-4144**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (9/96)