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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1996

DOCUMENT # 684401

(3)

PHILIP W. DANN ATTORNEY AT LAW, P.A.

Principal Place o		Mailing Address	•							
540 4TH ST N ST. PETERSBURG FL 33701-9302			540 4TH ST N ST. PETERSBURG FL 33701-9302							
						3. Date Incorporated or Qualified 08/07/1980	or Qualified 3a. Date of Last Report 04/27/1995			
2. Principal Plac	ce of Business	2a. Mailing Address 26	the man			4. FLI Number 59-2014806	Applied For Not Applicable			
Suite, Apt. #, etc.		Suite, Apt. #, etc.	27			5. Certificate of Status Desired		Fee Required		
City & State		City & State			Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees				
Z(p 24	Country 25	Zip 29	30 Cour	ntry 			s 🗌 No		s 199.032.	
	9. Name and Address of Cur	rrent Registered Agent		81	Name	10. Name and Address of New	ueBistelad i	- gent		
DANN, PI	HILIP W					ress (P.O. Box Number is Not Accepta	ible)			
540 4TH	ST N									
SI. PEIE	RSBURG FL 33701			84	City			85	Zip Code	
					,	pration submits this statement for the p	<u> </u>		·	
12. TITLE NAME STREET ADDRESS	OFFICERS  PTS  DANN, PHILIP W.  540 4TH ST N	AND DIRECTORS DELETE	13. 1 1 T/ 1 2 NA	lΓ'}-	AD :RESS	ADDITIONS/CHANGES TO OF		DIRECT Chang		
CITY-ST-ZIP	ST. PETERSBURG FL				31 2iP					
TITLE		DELETE	2 1 7				ì	Chang	e 🔲 Addition	
NAME			2 2 N/							
STREET ADDRESS			•		ADDRESS					
CITY-ST-ZIP TITLE		☐ CELET!	3 1 1		ST ZIP			Chang	e 🔲 Addition	
NAME.		£	3 2 N							
STREET ADDRESS			33.5	IREE	LABORESS					
CITY - ST-ZIP			340	TY - 5	ST 7P.					
TITLE		DELÉTE.	4 ¹ T					Chang	je 🔲 Addition	
NAME			4 2 N							
STREET ADDRESS					LADORESS					
CITY-ST-ZIF		[] DELETE	5 1 7		S1-24P			Chang	e	
TITLE			521		1		,			
NAME DIDECT ADDRESS					1 AE DRESS					
STREET ADDRESS					ST-ZP					
CITY - ST-ZIP TITLE		DELETE	6 1 1					Chan	ge 🔲 Addition	
NAME	1		62N	AME						
STREET ADDRESS			638	Ra	TACORESS					
CITY OF THE			640	HY-	ST-ZIP					
14. I do hereb	ly certify that the information supp I the information indicated on this I am an officer or directly registle on I Block 12 or Block 1341 changed	aled with this filing is voluntarily annual report or supplemental a bit pration or the receiver or tru- lior or an attachment with an a	furnished and annual report istee empowe iddress.	doe is tr ered	es not qualify we and accu I to execute t	y for the exemption stated in Section 1 irate and that my signature shall have t this report as required by Chapter 607,	19.07(3)(k), Fi he same lega Florida Statu	orida Sta Leffect a tes; and	atutes infurther is if made under that my name	

SIGNATURE:

PHILIP W. DANN

Chapteria

krytine Phone #

CR2E034 (12/95