

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 689801 (9)
1. Corporation Name
ARRANTS, CROMARTIE, WUAMETT & JOHNSON, P.A.



Principal Place of Business Mailing Address
588 STERTHAUS AVE 588 STERTHAUS AVE
ORMOND BCH FL 32174 ORMOND BCH FL 32174

3. Date Incorporated or Qualified 10/01/1980 3a. Date of Last Report 04/06/1995
4. FEI Number 59-2028748 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

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip 28 Zip Country 29 Zip Country
24 25 29 30

9. Name and Address of Current Registered Agent

TUMBLESON, J. DOYLE
150 S. PALMETTO AVE.
BOX A
DAYTONA BEACH FL 32114

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. 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, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

| TITLE | NAME | STREET ADDRESS | CITY - ST - ZIP | DELETE |
|-------|--------------------------|----------------------|-----------------|--------------------------|
| DP | ARRANTS, JACK E. | 311 JOHN ANDERSON DR | ORMOND BEACH FL | <input type="checkbox"/> |
| DV | CROMARTIE, R. SAMUEL III | 236 JOHN ANDERSON DR | ORMOND BEACH FL | <input type="checkbox"/> |
| DST | WUAMETT, JAMES D. | 769 N. BEACH STREET | ORMOND BCH. FL | <input type="checkbox"/> |
| D | JOHNSON, WILLIAM H III | 410 MAIN TR | ORMOND BCH FL | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> |

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

| 11 TITLE | 12 NAME | 13 STREET ADDRESS | 14 CITY - ST - ZIP | Change | Addition |
|----------|---------|-------------------|--------------------|--------------------------|--------------------------|
| 21 TITLE | 22 NAME | 23 STREET ADDRESS | 24 CITY - ST - ZIP | <input type="checkbox"/> | <input type="checkbox"/> |
| 31 TITLE | 32 NAME | 33 STREET ADDRESS | 34 CITY - ST - ZIP | <input type="checkbox"/> | <input type="checkbox"/> |
| 41 TITLE | 42 NAME | 43 STREET ADDRESS | 44 CITY - ST - ZIP | <input type="checkbox"/> | <input type="checkbox"/> |
| 51 TITLE | 52 NAME | 53 STREET ADDRESS | 54 CITY - ST - ZIP | <input type="checkbox"/> | <input type="checkbox"/> |
| 61 TITLE | 62 NAME | 63 STREET ADDRESS | 64 CITY - ST - ZIP | <input type="checkbox"/> | <input type="checkbox"/> |

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)(k), 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, changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone

4-10-96

904-672-9501

CR2E034 (12/95)