

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

FILED

May 09 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # 694917

(6)

1. Corporation Name

SPARKMAN AND QUINN, P.A.

Principal Place of Business

307 AIRPORT PULLING
RD NO.
NAPLES FL 33942
US

Mailing Address

P.O. BOX 7128
NAPLES FL 34101-7128
US



2. Principal Place of Business		2a. Mailing Address	
21 307 Airport Pulling Rd. No.		26 Suite, Apt. #, etc.	
22 Suite, Apt. #, etc.		27 City & State	
23 NAPLES FL		28 Zip	
24 34104		29 USA	
25		30	

3. Date Incorporated or Qualified	3a. Date of Last Report
07/16/1981	04/25/1996
4. FEI Number	Applied For
59-2119200	Not Applicable
5. Certificate of Status Desired	\$8.75 Additional Fee Required
<input type="checkbox"/>	\$5.00 May Be Added to Fees
6. Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/>
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes	
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
SPARKMAN, RICHARD D 307 AIRPT PULL. RD. NO. NAPLES FL 33942		81 Name Richard D. Sparkman	
		82 Street Address (P.O. Box Number is Not Acceptable)	
		307 Airport Pulling Rd. No.	
		83	
		84 City NAPLES	
		FL	
		85 Zip Code 34104	

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 _____ (NOTE: Registered Agent signature required when resigning) _____ DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP	1.1 TITLE	DP
NAME	QUINN, JEFFREY C	1.2 NAME	Quinn, Jeffrey C.
STREET ADDRESS	307 AIRPT PULL. RD. NO.	1.3 STREET ADDRESS	307 Airport Pulling Rd. No.
CITY-ST-ZIP	NAPLES, FL 33942	1.4 CITY-ST-ZIP	NAPLES FL 34104
TITLE	DST	2.1 TITLE	DST
NAME	SPARKMAN, RICHARD D	2.2 NAME	Richard D. Sparkman
STREET ADDRESS	307 AIRPT PULL. RD. NO.	2.3 STREET ADDRESS	307 Airport Pulling Rd. No.
CITY-ST-ZIP	NAPLES, FL 33942	2.4 CITY-ST-ZIP	NAPLES FL 34104
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
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 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 _____ 4/28/97 941 113-1671-3

CR2E034 (9/96)