

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

APPROVED
AND
FILED

95 JUN 15 PM 3:26

DOCUMENT # **F05346**

1. Corporation Name

Norman A. Hartman, Jr., P.A.

Principal Place of Business

**2133 Winkler Avenue
Suite 300
Fort Myers, FL 33901**

Mailing Address

**P.O. Box 6844
Fort Myers, FL 33911**

900001517429

-06/20/95--01055--010

******225.00 ****225.00**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/13/80

3a. Date of Last Report

01/14/94

4. FEI Number

59-2042264

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

21 same

2a. Mailing Address

26 same

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

27 City & State

Zip

Country

Zip

Country

24

25

28

30

9. Name and Address of Current Registered Agent

**Norman A. Hartman, Jr.
13361 Ponderosa Way
Fort Myers, Florida 33907**

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 registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE **P/D**
NAME **Norman A. Hartman, Jr.**
STREET ADDRESS **1435 Tredegar Drive**
CITY, ST, ZIP **Fort Myers, Florida 33919**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1 TITLE **P/D** ☒ Change ☐ Addition
NAME **Norman A. Hartman, Jr.**
STREET ADDRESS **13361 Ponderosa Way**
CITY, ST, ZIP **Fort Myers, Florida 33907**

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

2 TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

3 TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY, ST, ZIP

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

4 TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY, ST, ZIP

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

5 TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY, ST, ZIP

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

6 TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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)(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 007, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an amendment with an address.

SIGNATURE:

Norman A. Hartman, Jr., President

5/11/95

(813) 936-2841

RIN