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 # **F32956** **(7)**

1. Corporation Name

GARDNER, SHELFER, DUGGAR & BIST, P.A.

Principal Place of Business
1300 THOMASWOOD DRIVE
TALLAHASSEE FL 32312

Mailing Address
1300 THOMASWOOD DRIVE
TALLAHASSEE FL 32312

3. Date Incorporated or Qualified: 05/01/1981
3a. Date of Last Report: 03/13/1995
4. FEI Number: 59-2088596 — [ ] 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 [X] Yes [ ] No

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

9. **Name and Address of Current Registered Agent**

GARDNER, CHARLES R.
1300 THOMASWOOD DRIVE
TALLAHASSEE FL 32312

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 Section ... 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. ... I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section ... Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

TITLE	VD	[ ] DELETE
NAME	SHELFER, JAMES O	
STREET ADDRESS	1300 THOMASWOOD DRIVE	
CITY-ST-ZIP	TALLAHASSEE, FL 00000	
TITLE	PD	[ ] DELETE
NAME	GARDNER, CHARLES R	
STREET ADDRESS	1300 THOMASWOOD DRIVE	
CITY-ST-ZIP	TALLAHASSEE, FL 00000	
TITLE	STD	[ ] DELETE
NAME	DUGGAR, ELAINE N	
STREET ADDRESS	1300 THOMASWOOD DRIVE	
CITY-ST-ZIP	TALLAHASSEE, FL 00000	
TITLE	VD	[ ] DELETE
NAME	BIST, MICHAEL P.	
STREET ADDRESS	1300 THOMASWOOD DR	
CITY-ST-ZIP	TALLAHASSEE FL	
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1 TITLE / 1 NAME / 1 STREET ADDRESS / 1 CITY-ST-ZIP		[ ] Change [ ] Addition
2 TITLE / 2 NAME / 2 STREET ADDRESS / 2 CITY-ST-ZIP		[ ] Change [ ] Addition
3 TITLE / 3 NAME / 3 STREET ADDRESS / 3 CITY-ST-ZIP		[ ] Change [ ] Addition
4 TITLE / 4 NAME / 4 STREET ADDRESS / 4 CITY-ST-ZIP		[ ] Change [ ] Addition
5 TITLE / 5 NAME / 5 STREET ADDRESS / 5 CITY-ST-ZIP		[ ] Change [ ] Addition
6 TITLE / 6 NAME / 6 STREET ADDRESS / 6 CITY-ST-ZIP		[ ] Change [ ] Addition

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 report or supplemental 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, with all other like empowered.

SIGNATURE: [signature] 4-10-96 904-385-0070

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Michael P. Bist

CR2E034 (12/95)