

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

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JAN 18 AM 8:43

DOCUMENT # **G03349** (9)

1. Corporation Name

VARNER, STAFFORD & SEAMAN, P.A.

Principal Place of Business

2328 10TH AVE. NO.
~~SUITE 2-B~~
LAKE WORTH FL 33461
US

Mailing Address

2328 10TH AVE. NO.
~~SUITE 2-B~~
LAKE WORTH FL 33461
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
10/06/1982

3a. Date of Last Report
01/28/1994

4. FEI Number
59-2220545

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 1993 DP
Florida Statutes Yes No

2. Principal Place of Business

21

Suite, Apt. #, etc.

Suite 202

City & State

23

Zip

24

2a. Mailing Address

26

Suite, Apt. #, etc.

Suite 202

City & State

28

Zip

25

2b. Mailing Address

27

Suite, Apt. #, etc.

Suite 202

City & State

28

Zip

29

Country

30

Country

30

9. Name and Address of Current Registered Agent

VARNER, DEWEY H
2328 TENTH AVE., NORTH
SUITE 2-B 202
LAKE WORTH FL 33461

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 of registered agent or president of registered agent and filed as applicable

Signature of Registered Agent or President of Registered Agent

Date

12. OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

TITLE

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CITY, ST, ZIP

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STREET ADDRESS

CITY, ST, ZIP

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE

12 NAME

13 STREET ADDRESS

14 CITY, ST, ZIP

15 TITLE

16 NAME

17 STREET ADDRESS

18 CITY, ST, ZIP

19 TITLE

20 NAME

21 STREET ADDRESS

22 CITY, ST, ZIP

23 TITLE

24 NAME

25 STREET ADDRESS

26 CITY, ST, ZIP

27 TITLE

28 NAME

29 STREET ADDRESS

30 CITY, ST, ZIP

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY, ST, ZIP

35 TITLE

36 NAME

37 STREET ADDRESS

38 CITY, ST, ZIP

13796 DoubleTree TRAIL
Wellington, FL 33414

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in law bars 199.02(1)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and correct 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 447, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report, or on an attachment with an address.

SIGNATURE:

Dewey H. Varner

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Dewey H. Varner

VARNER

Date

1-10-95

533-7820