

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

FILED
Feb 18 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **G46845** (5)
1. Corporation Name
DUNCAN & ASSOCIATES, INC.

Principal Place of Business
**CENTURY PROFESSIONAL PLAZA
7410 S. US HIGHWAY 1, STE 100
PORT ST LUCIE FL 34952**

Mailing Address
**CENTURY PROFESSIONAL PLAZA
7410 S. US HIGHWAY 1, STE 100
PORT ST LUCIE FL 34952**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
06/29/1983

4. FEI Number
59-2303249

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 owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ 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

25 Country

28 Zip

30 Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**DUNCAN, PATRICK F.
CENTURY PROFESSIONAL PLAZA
7410 S. US HIGHWAY 1, STE 100
PORT ST. LUCIE FL 34952**

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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PD
DUNCAN, PARTICK F.
128 N. NARANJA AVE.
PORT ST. LUCIE FL 34983**

11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY-ST-ZIP

**DUNCAN, PATRICK F.
128 N. NARANJA AVE.
PORT ST LUCIE FL 34983**

☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VSD
DUNCAN, INGE S.
128 N. NARENJA AVE.
PORT ST. LUCIE FL 34983**

21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY-ST-ZIP

~~INGE D. WILLIAMS
900 CORAL RIDGE DRIVE - #302 CLUB MIRA LA
CORAL SPRINGS FL 33071~~

☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
WILLIAMS, INGE D.
11241 W ATLANTIC BLVD #207
PARKLAND FL**

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY-ST-ZIP

**INGE D. WILLIAMS
900 CORAL RIDGE DR. - #302, CLUB MIRA LA
CORAL SPRINGS FL 33071**

☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
WARD, COY
350 WOODCRST DR
FORT PIERCE FL**

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP

**COY C. WARD
350 WOODCREST DRIVE
FORT PIERCE FL 34945**

☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VD
JOHNSON, DALE W.
887 BUGSCUFFLE ROAD
HIAWASSEE GA**

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP

**DALE W. JOHNSON
601 HOWARD STREET
FORT PIERCE FL 34982**

☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY-ST-ZIP

☐ Change ☐ Addition

14. I 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

Patrick F. Duncan

2-13-98 500-542-0210

CR2E034 (10/97)