

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

FILED
May 08 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 # **G75295** (7)
1. Corporation Name
ANDREW J. BRITTON, P.A.

Principal Place of Business
**245 N TAMAMI TRAIL
SUITE A
VENICE FL 34285**

Mailing Address
**245 N TAMAMI TRAIL
SUITE A
VENICE FL 34285**



DO NOT WRITE IN THIS SPACE

3. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 12/13/1983	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		4. FEI Number 59-2358354	
22 City & State		27 City & State		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
23 Zip		28 Zip		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
24 Country		29 Country		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent BRITTON, ANDREW J 245 N TAMAMI TRAIL SUITE A VENICE FL 34285				10. Name and Address of New Registered Agent	
81 Name				82 Street Address (P.O. Box Number is Not Acceptable)	
83				84 City	
				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 reinstalling)		DATE							
12. OFFICERS AND DIRECTORS						13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12					
1.1 TITLE <input type="checkbox"/> DELETE						1.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition					
1.2 NAME BRITTON, ANDREW J						1.2 NAME					
1.3 STREET ADDRESS 430 Palmetto Creek						1.3 STREET ADDRESS					
1.4 CITY - ST - ZIP Nokomis, FL 34275						1.4 CITY - ST - ZIP					
2.1 TITLE <input type="checkbox"/> DELETE						2.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition					
2.2 NAME						2.2 NAME					
2.3 STREET ADDRESS						2.3 STREET ADDRESS					
2.4 CITY - ST - ZIP						2.4 CITY - ST - ZIP					
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6.3 STREET ADDRESS						6.3 STREET ADDRESS					
6.4 CITY - ST - ZIP						6.4 CITY - ST - ZIP					

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:  Pres 4-30-98 941-484-7102
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # 0458888

CR2E034 (10/97)