

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.  
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

FILED  
Jul 30 1997 8:00am  
Secretary of State

DOCUMENT # G81103 (5)

1. Corporation Name  
HOLMES & COMPANY, P.A.

Principal Place of Business

2114 AIRPORT BLVD  
SUITE 1250  
PENSACOLA FL 32504  
US

Mailing Address

2114 AIRPORT BLVD  
SUITE 1250  
PENSACOLA FL 32504  
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/27/1984

3a. Date of Last Report

07/29/1986

4. FEI Number

59-2360862

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

21 99 SOUTH ALCANIZ ST.

Suite, Apt. #, etc.

22 SUITE A

City & State

23 PENSACOLA, FL

Zip

24 32501

Country

25 USA

2a. Mailing Address

26 99 SOUTH ALCANIZ ST.

Suite, Apt. #, etc.

27 SUITE A

City & State

28 PENSACOLA, FL

Zip

29 32501

Country

30 USA

9. Name and Address of Current Registered Agent

HOLMES, ROBERT G.  
2114 AIRPORT BOULEVARD  
STE 1250  
PENSACOLA FL 32504

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83 99 S. ALCANIZ STREET

84 SUITE A

85 PENSACOLA

FL

86 Zip Code

87 32501

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 ROBERT G. HOLMES

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

7-25-97

12. OFFICERS AND DIRECTORS

TITLE PD ☐ DELETE

NAME HOLMES, ROBERT G.

STREET ADDRESS 2114 AIRPORT BLVD, STE 1250

CITY-ST-ZIP PENSACOLA FL

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

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

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

99 S. ALCANIZ ST, SUITE A

32501

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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 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 ROBERT G. HOLMES 7-25-97 GDU-444-9800

CR2E034 (4/97)