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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # H09250

(2)

KURT ANDREW SIMPSON A PROFESSIONAL ASSOCIATION

Principal Place of Business Mailing Address % KURT ANDREW SIMPSON % KURT ANDREW SIMPSON

3500 SOUTH THIRD STREET, OCEAN SOUTH JACKSONVILLE BEACH FL 32250		3500 SOUTH THIRD STREET. OCEAN SOUTH JACKSONVILLE BEACH FL 32250								
JACKSONVILLE	DENOTIFE 32230	MORSONVILLE BERON FL	. 02200			3. Date Incorporated or Qualified 07/01/1984	1	nte of Last F 10/1996	Report	
2. Principal P	lace of Business	2a. Malling Address			4. FEI Number	1. • 17		pplied For		
21		26			59-2443804		N	ot Applicable		
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired			Additional equired		
City & State	0	City & State			6. Election Campaign Financing		\$5.00	May Be		
23		28	28			Trust Fund Contribution Added to Fees				
Zip	Country	Zip	Countr	у		8. This corporation has liability for in		tax under s	s. 199.032,	
24	25	29	30			Florida Statutes Yes No				
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent 81 Name					
SIMPSON, KURT ANDREW				' '	Name				·	
3500 SOUTH THIRD STREET OCEAN SOUTH			82	2 3	Street Addr	eet Address (P.O. Box Number is Not Acceptable)				
JACKSONVILLE BEACH FL 32250				3						
			84	1 0	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 age					ed when reinstating)	DATE			
12.	OFFICERS AN		13.	joni :	signature redori	ADDITIONS/CHANGES TO OFFIC		DIRECTO	RS IN 12	
TITLE	DP .	DELETE	1.1 TITLE			7,001101000101010010	C.110 1 11 12	Change	Addition	
NAME	SIMPSON, KURT ANDREW		1.2 NAME							
STREET ADDRESS	3500 SO. 3RD ST.		1.3 STREE	TAD	DRESS					
CITY-ST-ZIP	HAMAAHAI IN BALLAS		1.4 CITY-							
TITLE	DELETE 2.17		2.1 TITLE					Change	Addition	
NAME			2 2 NAME	2 2 NAME						
STREET ADDRESS			2.3 STREET ADDRESS		DRESS					
CITY-ST-ZIP				ST-	ZIP					
TITLE		☐ DELETE	3.1 TITLE					☐ Change	Addition	
NAME			3.2 NAME							
STREET ADDRESS			3.3 STREE	T AD	ORESS					
CITY-ST-ZIP			3.4. CITY-	\$1-	ZIP					
TITLE		☐ DELETE	4.1 TITLE					Change	☐ Addition	
NAME	3, , , , , ,		4. 2 NAME							
STREET ADDRESS	• •		4.3 STREE	I AD	DRESS					
CITY-ST-ZIP			44 CITY-	ST-Z	ZIP					
TITLE		☐ DELETE	51 TATLE					Change	☐ Addition	
NAME			52 NAME							
STREET ADDRESS			5 3 STREE							
CITY-ST-ZIP			5.4 CITY-	ST-Z	ZIP		·	TT -:		
TITLE		☐ DELETE	61 TITLE					L Change	Addition	
NAME			6.2 NAME							
STREET ADDRESS			6.3 STREE	1 AD	DRESS					

6.4 CITY-ST-ZIP 14. I do hereby certify that the information supplied with this filling 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 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 of 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.

FILED

Apr 09 1997 8:00am

Secretary of State