

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **H09858** (2)

1. Corporation Name
T. FRED ROCHE, JR. & ASSOCIATES, INC.



Principal Place of Business: **% T. FRED ROCHE, JR. 123 HOLLY TREE LANE BRANDON FL 33511**
Mailing Address: **% T. FRED ROCHE, JR. 123 HOLLY TREE LANE BRANDON FL 33511**

2. Principal Place of Business: 21, 22, 23, 24
2a. Mailing Address: 26, 27, 28, 29, 30

3. Date Incorporated or Qualified: **06/27/1984**
3a. Date of Last Report: **04/06/1995**
4. FEI Number: **59-2428792**
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 s. 199.032, Florida Statutes: Yes No

9. Name and Address of Current Registered Agent
ROCHE, T. FRED JR. 123 HOLLY TREE LANE BRANDON FL

10. Name and Address of New Registered Agent
81 Name: **Betty Roche**
82 Street Address (P.O. Box Number is Not Acceptable): **123 Holly Tree Lane**
83
84 City: **Brandon** FL 85 Zip Code: **33511**

11. Pursuant to the provisions of Sections 607.0501 and 607.1505, Florida Statutes, for above named corporation submit this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change will take effect if the corporation's board of directors, members, or partners, accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: *Betty Roche* Betty Roche

4/1/96

12. OFFICERS AND DIRECTORS

| | | | | |
|-------|---|--------------------|--------------------------------|---------------------------------|
| TITLE | P | ROCHE, T. FRED JR. | 123 HOLLY TREE LANE BRANDON FL | <input type="checkbox"/> DELETE |
| TITLE | S | ROCHE, BETTY | 123 HOLLY TREE LANE BRANDON FL | <input type="checkbox"/> DELETE |
| TITLE | | | | <input type="checkbox"/> DELETE |
| TITLE | | | | <input type="checkbox"/> DELETE |
| TITLE | | | | <input type="checkbox"/> DELETE |
| TITLE | | | | <input type="checkbox"/> DELETE |

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

| | |
|-------------------|---|
| 11 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 12 NAME | |
| 13 STREET ADDRESS | |
| 14 CITY, ST, ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 15 TITLE | |
| 16 NAME | |
| 17 STREET ADDRESS | |
| 18 CITY, ST, ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 19 TITLE | |
| 20 NAME | |
| 21 STREET ADDRESS | |
| 22 CITY, ST, ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 23 TITLE | |
| 24 NAME | |
| 25 STREET ADDRESS | |
| 26 CITY, ST, ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(g), 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 file or file the report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of this change form or in an attached form with a true copy.

SIGNATURE: *Betty Roche* Betty Roche, Secy 4/1/96 813-689-1117

CR2E034 (12/95)