

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

FILED

May 13 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # H19619
1. Corporation Name: BENJAMIN D. RUST, P.A.

Principal Place of Business Mailing Address
359 North Monroe street
TALL., FLA 32301

2. Principal Place of Business 21 <u>see above</u> State, Apt. #, etc.	2a. Mailing Address 26 <u>see above</u> Suite, Apt. #, etc.	3. Date Incorporated or Qualified <u>don't recall</u>	3a. Date of Last Report <u>1996</u>
22 City & State	27 City & State	4. FET Number <u>59-2452021</u>	Applied For Not Applicable
23 Zip	28 Zip	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
24 Country	29 Country	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
	30	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent BENJAMIN D. RUST 359 N. MONROE ST. TALLA, FLA. 32301	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 FL
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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 obligation of, Section 607.0508, Florida Statutes.

SIGNATURE: Benjamin D. Rust DATE: 4/21/97
(NOTE: Registered Agent's signature required when reinstating)

12. OFFICERS AND DIRECTORS 12.1 TITLE: <u>Pres, V.P., secretary, etc.</u> 12.2 NAME: <u>BENJAMIN D. RUST</u> 12.3 STREET ADDRESS: <u>359 N. MONROE ST.</u> 12.4 CITY-ST-ZIP: <u>TALLA, FLA 32301</u> 12.5 NO other corporate officers 12.6 12.7 12.8 12.9 12.10 12.11 12.12 12.13 12.14 12.15 12.16 12.17 12.18 12.19 12.20	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13.1 TITLE 13.2 NAME 13.3 STREET ADDRESS 13.4 CITY-ST-ZIP 13.5 13.6 13.7 13.8 13.9 13.10 13.11 13.12 13.13 13.14 13.15 13.16 13.17 13.18 13.19 13.20
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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, changed, or on an attachment with an address.

SIGNATURE: Benjamin D. Rust DATE: 4/21/97 DAYTIME PHONE: 224-2424
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (9/96)