FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 JUN -1 AM 11:12

DOCUMENT # **H22269** **(5)**

1. Corporation Name
CUNNINGHAM & CUNNINGHAM, P.A.

Principal Place of Business	Mailing Address
1897 PALM BCH LKS BLVD CROSS RD BLDG 201 P.O. BOX 3543 WEST PALM BEACH FL 33409-0543	1897 PALM BCH LKS BLVD CROSS RD BLDG 201 P.O. BOX 3543 WEST PALM BEACH FL 33409-0543

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **09/24/1984**
3a. Date of Last Report: **02/08/1994**

2. Principal Place of Business
21 1897 Palm Bch. Lakes Blvd.
Suite, Apt. #, etc.
22 Cross Roads Bldg. #201
City & State
23 West Palm Beach, FL
Zip 24 33409 Country 25 USA

2a. Mailing Address
26 1897 Palm Bch. Lks. Blvd.
Suite, Apt. #, etc.
27 Cross Roads Bldg. #201
City & State
28 West Palm Beach, FL
Zip 29 33409 Country 30 USA

4. FEI Number: **59-2455217** ☐ 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 has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

CUNNINGHAM, T. J.
1897 PALM BEACH LAKES BLVD.
CROSS ROADS BUILDING, SUITE 201
WEST PALM BEACH FL 33409

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Section 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 _____ (Name of New Registered Agent) _____ (Date)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP	11 TITLE	☐ Change ☐ Addition
NAME	CUNNINGHAM, T. J.	12 NAME	
STREET ADDRESS	1897 PALM BEACH LAKES BL	13 STREET ADDRESS	
CITY ST ZIP	W. PALM BEACH FL	14 CITY ST ZIP	
TITLE		21 TITLE	☐ Change ☐ Addition
NAME		22 NAME	
STREET ADDRESS		23 STREET ADDRESS	
CITY ST ZIP		24 CITY ST ZIP	
TITLE		31 TITLE	☐ Change ☐ Addition
NAME		32 NAME	
STREET ADDRESS		33 STREET ADDRESS	
CITY ST ZIP		34 CITY ST ZIP	
TITLE		41 TITLE	☐ Change ☐ Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY ST ZIP		44 CITY ST ZIP	
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY ST ZIP		54 CITY ST ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY ST ZIP		64 CITY ST ZIP	

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)(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 any attachment with an address.

SIGNATURE: _____ 5/30/95 407/683 2900
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0436321 FP