

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **H44759 (9)**

1. Corporation Name:

OLIVER & COMPANY, P.A., CERTIFIED PUBLIC ACCOUNTANTS



Principal Place of Business:

18 N BROAD STREET
BROOKSVILLE FL 34601

Mailing Address:

18 N BROAD STREET
BROOKSVILLE FL 34601

2. Principal Place of Business:

21 Suite, Apt. #, etc.

22 City & State

24 Zip

25 Country

2a. Mailing Address:

26 Suite, Apt. #, etc.

27 City & State

28 Zip

30 Country

9. Name and Address of Current Registered Agent

**HERMAN A. VIDAL
18 N. BROAD STREET
BROOKSVILLE FL 34601**

3. Date Incorporated or Qualified
02/27/1985

3a. Date of Last Report
04/17/1995

4. FEI Number
59-2485874

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

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 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 of the person who is registered agent of the corporation

Signature of the person who is Secretary of State

DATE

12. OFFICERS AND DIRECTORS

TITLE	PM	<input type="checkbox"/> DELETE
NAME	VIDAL, HERMAN A., CPA	
STREET ADDRESS	18 N BROAD ST	
CITY-ST-ZIP	BROOKSVILLE FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	PATTERSON, O. CLINTON	
STREET ADDRESS	18 N BROAD ST	
CITY-ST-ZIP	BROOKSVILLE FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	GARY, MARY B	
STREET ADDRESS	18 NO. BROAD ST.	
CITY-ST-ZIP	BROOKSVILLE FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	DEASON, C. K	
STREET ADDRESS	18 NO. BROAD ST.	
CITY-ST-ZIP	BROOKSVILLE FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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	
21 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	D/T
23 STREET ADDRESS	
24 CITY-ST-ZIP	
31 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	D/S
33 STREET ADDRESS	
34 CITY-ST-ZIP	
41 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	D/V
43 STREET ADDRESS	
44 CITY-ST-ZIP	
51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	
53 STREET ADDRESS	
54 CITY-ST-ZIP	
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	
63 STREET ADDRESS	
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)(b) 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 a trustee or trustee-in-power 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: ✓ *Herman A. Vidal*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

✓ 3/26/96 352-796-1444
DATE OF FILING

CR2E034 (12/95)