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95 MAY -1 PM 8:52

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

CORPORATION ANNUAL REPORT <b>1995</b>		FLORIDA DEPARTMENT OF STATE Sandra B. Morham Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # H67635 (3)**

1. Corporation Name  
**DAN PHILLIP BRAWLEY, P.A.**

Principal Place of Business <b>100 S KENTUCKY AVE., STE 240 LAKELAND FL 33801</b>	Mailing Address <b>100 S KENTUCKY AVE., STE 240 LAKELAND FL 33801</b>
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DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified <b>07/23/1985</b>	3a. Date of Last Report <b>05/01/1994</b>
4. FEI Number <b>59-2557948</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business 21 Suits, Apt. #, etc. 22 City & State 24 Zip 25 Country	2a. Mailing Address 26 Suits, Apt. #, etc. 27 City & State 29 Zip 30 Country
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9. Name and Address of Current Registered Agent

**BRAWLEY, DAN PHILLIP  
100 S KENTUCKY AVE., STE 240  
LAKELAND FL 33801**

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

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation admits this statement for the purpose of changing its registered officer 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 \_\_\_\_\_ (NOTE: Registered Agent signature required when registering) \_\_\_\_\_ DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE <b>PO</b>	NAME <b>BRAWLEY, DAN PHILLIP</b>	11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS <b>100 S KENTUCKY AVE #240</b>	CITY ST ZIP <b>LAKELAND FL</b>	12 NAME	
		13 STREET ADDRESS	
		14 CITY ST ZIP	
TITLE <b>ST</b>	NAME <b>BRAWLEY, DAN PHILLIP</b>	21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS <b>100 S KENTUCKY AVE #240</b>	CITY ST ZIP <b>LAKELAND FL</b>	22 NAME	
		23 STREET ADDRESS	
		24 CITY ST ZIP	
		31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
		32 NAME	
		33 STREET ADDRESS	
		34 CITY ST ZIP	
		41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
		42 NAME	
		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 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, the name of which appears in Block 1, or its registered agent, as indicated in Block 9.

SIGNATURE: *Dan Phillip Brawley* (Handwritten Signature)  
 SIGNATURE AND TYPE OR PRINTED NAME OF AGING OFFICER OR DIRECTOR: **Dan Phillip Brawley**  
 DATE: **4/27/95** (813) 687-8417