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95 MAY -1 PM 8:52

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

| | | |
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| CORPORATION ANNUAL REPORT 1995 |  | FLORIDA DEPARTMENT OF STATE Sandra B. Morham Secretary of State DIVISION OF CORPORATIONS |
|---|---|---|

DOCUMENT # H67635 (3)

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

| | |
|--|--|
| Principal Place of Business 100 S KENTUCKY AVE., STE 240 LAKELAND FL 33801 | Mailing Address 100 S KENTUCKY AVE., STE 240 LAKELAND FL 33801 |
|--|--|

DO NOT WRITE IN THIS SPACE

| | |
|--|--|
| 3. Date Incorporated or Qualified 07/23/1985 | 3a. Date of Last Report 05/01/1994 |
| 4. FEI Number 59-2557948 | Applied For <input type="checkbox"/> Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |
| 6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> | \$5.00 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 |
|---|--|

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 PO | NAME BRAWLEY, DAN PHILLIP | 11 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition | |
| STREET ADDRESS 100 S KENTUCKY AVE #240 | CITY ST ZIP LAKELAND FL | 12 NAME | |
| | | 13 STREET ADDRESS | |
| | | 14 CITY ST ZIP | |
| TITLE ST | NAME BRAWLEY, DAN PHILLIP | 21 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition | |
| STREET ADDRESS 100 S KENTUCKY AVE #240 | CITY ST ZIP LAKELAND FL | 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