

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 MAY -1 AM 9:57

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **H74333** (6)

1. Corporation Name

BEHUNE, ASSEF & ASSOCIATES, INC.

Principal Place of Business

% RONALD ASSEF
2452 PGA BLVD.
PALM BCH. GARDENS FL 33410
US

Mailing Address

% RONALD ASSEF
2452 PGA BLVD.
PALM BCH. GARDENS FL 33410
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 09/03/1985	3a. Date of Last Report 05/01/1994
4. FID Number 59-2814397	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. 199.04, Florida Statutes. ☐ Yes ☐ No	

2. Principal Place of Business	2a. Mailing Address
21. State, Apt. # etc.	26. State, Apt. # etc.
22. City & State	27. City & State
23. Zip	28. Zip
24. Country	29. Country
25. Country	30. Country

9. Name and Address of Current Registered Agent

**ASSEF, RONALD
2452 PGA BLVD.
PALM BCH. GARDENS FL 33410**

10. Name and Address of New Registered Agent

81. Name	
82. Street Address (P.O. Box Number is Not Acceptable)	
83. City	
84. State	FL
85. Zip Code	33410

11. Pursuant to the requirements of Sections 199.01, 199.02, and 199.03, Florida Statutes, this document 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 this appointment as registered agent. I am familiar with and accept the obligations of agents as set forth in Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS	13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS
1. NAME 2. STREET ADDRESS 3. CITY, ST. ZIP	1. NAME 2. STREET ADDRESS 3. CITY, ST. ZIP
4. NAME 5. STREET ADDRESS 6. CITY, ST. ZIP	4. NAME 5. STREET ADDRESS 6. CITY, ST. ZIP
7. NAME 8. STREET ADDRESS 9. CITY, ST. ZIP	7. NAME 8. STREET ADDRESS 9. CITY, ST. ZIP
10. NAME 11. STREET ADDRESS 12. CITY, ST. ZIP	10. NAME 11. STREET ADDRESS 12. CITY, ST. ZIP
13. NAME 14. STREET ADDRESS 15. CITY, ST. ZIP	13. NAME 14. STREET ADDRESS 15. CITY, ST. ZIP
16. NAME 17. STREET ADDRESS 18. CITY, ST. ZIP	16. NAME 17. STREET ADDRESS 18. CITY, ST. ZIP
19. NAME 20. STREET ADDRESS 21. CITY, ST. ZIP	19. NAME 20. STREET ADDRESS 21. CITY, ST. ZIP
22. NAME 23. STREET ADDRESS 24. CITY, ST. ZIP	22. NAME 23. STREET ADDRESS 24. CITY, ST. ZIP
25. NAME 26. STREET ADDRESS 27. CITY, ST. ZIP	25. NAME 26. STREET ADDRESS 27. CITY, ST. ZIP
28. NAME 29. STREET ADDRESS 30. CITY, ST. ZIP	28. NAME 29. STREET ADDRESS 30. CITY, ST. ZIP
31. NAME 32. STREET ADDRESS 33. CITY, ST. ZIP	31. NAME 32. STREET ADDRESS 33. CITY, ST. ZIP
34. NAME 35. STREET ADDRESS 36. CITY, ST. ZIP	34. NAME 35. STREET ADDRESS 36. CITY, ST. ZIP
37. NAME 38. STREET ADDRESS 39. CITY, ST. ZIP	37. NAME 38. STREET ADDRESS 39. CITY, ST. ZIP
40. NAME 41. STREET ADDRESS 42. CITY, ST. ZIP	40. NAME 41. STREET ADDRESS 42. CITY, ST. ZIP
43. NAME 44. STREET ADDRESS 45. CITY, ST. ZIP	43. NAME 44. STREET ADDRESS 45. CITY, ST. ZIP
46. NAME 47. STREET ADDRESS 48. CITY, ST. ZIP	46. NAME 47. STREET ADDRESS 48. CITY, ST. ZIP
49. NAME 50. STREET ADDRESS 51. CITY, ST. ZIP	49. NAME 50. STREET ADDRESS 51. CITY, ST. ZIP
52. NAME 53. STREET ADDRESS 54. CITY, ST. ZIP	52. NAME 53. STREET ADDRESS 54. CITY, ST. ZIP
55. NAME 56. STREET ADDRESS 57. CITY, ST. ZIP	55. NAME 56. STREET ADDRESS 57. CITY, ST. ZIP
58. NAME 59. STREET ADDRESS 60. CITY, ST. ZIP	58. NAME 59. STREET ADDRESS 60. CITY, ST. ZIP
61. NAME 62. STREET ADDRESS 63. CITY, ST. ZIP	61. NAME 62. STREET ADDRESS 63. CITY, ST. ZIP
64. NAME 65. STREET ADDRESS 66. CITY, ST. ZIP	64. NAME 65. STREET ADDRESS 66. CITY, ST. ZIP
67. NAME 68. STREET ADDRESS 69. CITY, ST. ZIP	67. NAME 68. STREET ADDRESS 69. CITY, ST. ZIP
70. NAME 71. STREET ADDRESS 72. CITY, ST. ZIP	70. NAME 71. STREET ADDRESS 72. CITY, ST. ZIP
73. NAME 74. STREET ADDRESS 75. CITY, ST. ZIP	73. NAME 74. STREET ADDRESS 75. CITY, ST. ZIP
76. NAME 77. STREET ADDRESS 78. CITY, ST. ZIP	76. NAME 77. STREET ADDRESS 78. CITY, ST. ZIP
79. NAME 80. STREET ADDRESS 81. CITY, ST. ZIP	79. NAME 80. STREET ADDRESS 81. CITY, ST. ZIP
82. NAME 83. STREET ADDRESS 84. CITY, ST. ZIP	82. NAME 83. STREET ADDRESS 84. CITY, ST. ZIP
85. NAME 86. STREET ADDRESS 87. CITY, ST. ZIP	85. NAME 86. STREET ADDRESS 87. CITY, ST. ZIP
88. NAME 89. STREET ADDRESS 90. CITY, ST. ZIP	88. NAME 89. STREET ADDRESS 90. CITY, ST. ZIP
91. NAME 92. STREET ADDRESS 93. CITY, ST. ZIP	91. NAME 92. STREET ADDRESS 93. CITY, ST. ZIP
94. NAME 95. STREET ADDRESS 96. CITY, ST. ZIP	94. NAME 95. STREET ADDRESS 96. CITY, ST. ZIP
97. NAME 98. STREET ADDRESS 99. CITY, ST. ZIP	97. NAME 98. STREET ADDRESS 99. CITY, ST. ZIP
100. NAME 101. STREET ADDRESS 102. CITY, ST. ZIP	100. NAME 101. STREET ADDRESS 102. CITY, ST. ZIP

14. I, the undersigned, certify that the information supplied with this filing is verifiably furnished and does not equally for the corporation stated in s. 199.01, 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. I am an officer or director of the corporation or the registered agent or preparer of this report as required by Chapter 199, Florida Statutes, and that my name appears in Block 12 or Block 13 of this form.

SIGNATURE:

Ronald Assef
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/28/95 407-775-7311