FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # H84176

(7)

SMITH - BARNES ARCHITECTURE, INC.

Principal Place 815 S. HOWAF TAMPA FL 336	RD AVE.	Mailing Address 815 S. HOWARD AVE. TAMPA FL 33606-2416			
INMEN EL SA		THIN I I GOOD ETTO		3. Date incorporated or Qualified 11/04/1985	3a. Date of Last Report 02/16/1996
2. Principal Pi	iace of Business	2a. Mailing Address		4. FEt Number	Applied For
21 26			59-2605734	Not Applicable	
Suite, Apt #, etc		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
2 3 Zip	Country	28	Country		Added to Fees
24	25	29	30	This corporation has liability for in: Florida Statutes	tangible tax under s. 199.032, Yes : No
£4	9. Name and Address of Curren		1301	10. Name and Address of New Regi	
WIG	GINTON, J. RONALD		81 Name	· · · · · · · · · · · · · · · · · · ·	
	N. FRANKLIN ST.		82 Street Ad	Idress (P.O. Box Number is Not Acceptable	9)
TAN	IPA FL 33602				·
			83		
			84 City		FL 85 Zip Code
11. Pursuant office or ragent. La				orporation submits this statement for the puration's board of directors. I hereby accept	
12.	Signature, typed or purified name of registered age OFFICERS ANI		E: Registered Agent signature red	quired when reinstating) ADDITIONS/CHANGES TO OFFICE	DATE
TITLE	PSD OF TOURS AND	DELETE	1.1 TITLE	ADDITIONS/CHANGES TO OFFICE	K Change Addition
NAME	BARNES, RICHARD A.		1.2 NAME		
STREET ADDRESS	207-S: TRASK STREET		1.3 STREET ADDRESS	4301 West Beachway Driv	ve
CITY-ST-7#	Tampa Fl.		1.4 CITY-ST-ZIP	•	
TITLE	VTD	DELETE	21 TITLE		☐ Change ☐ Addition
NAME	SMITH, ERNEST L.		2 2 NAME	•	
STREET ADDRESS	4226 FAIRWAY RUN		2 3 STREET ADDRESS		
CITY-ST-ZP	TAMPA FL	DELETE	2 4 CITY-ST-ZIP		Change Addition
TITLE		ביין ספנבוני	31 TiTLE 32 NAME		Change Addition
NAME STREET ADDRESS			33 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE		Change Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-\$1-ZIP			4.4 CITY-ST-ZIP		
TITLE		DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY - ST - ZIP		T 551.555	5.4 CITY - ST - ZIP		
TITLE		☐ DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		

6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing 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 suppliemental at inal 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 truetee 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 an attachment with an address.

SIGNATURE

Richard A. Barnes

0.

813/251-1884

FILED

Feb 05 1997 8:00am

Secretary of State