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Jun 10 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # J00842 (1)

1. Corporation Name
RICHARD SHEPARD CONSULTANTS, INC.



Principal Place of Business

1114 N. ADAMS ST
SUITE #3
TALLAHASSEE FL 32303
US

Mailing Address

1114 N. ADAMS ST
SUITE #3
TALLAHASSEE FL 32303-6135
US

2. Principal Place of Business

21 216 EAST OAKLAND

Suite, Apt. #, etc.

22 SUITE 2

City & State

23 TALLAHASSEE

Zip

24 32301-4472

Country

25 LEON

2a. Mailing Address

26 216 E. OAKLAND

Suite, Apt. #, etc.

27 SUITE 2

City & State

28 TALLAHASSEE

Zip

29 FL

Country

30 32301-4472

3. Date Incorporated or Qualified

02/25/1986

3a. Date of Last Report

04/24/1996

4. FEI Number

59-2639122

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

9. Name and Address of Current Registered Agent

SHEPARD, RICHARD F.
452 FOREST GREEN DR.
TALLAHASSEE FL 32308

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, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

(DATE)

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP

PST
SHEPARD, RICHARD
452 FOREST GREEN DR.
TALLAHASSEE FL

☐ DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

D
SHEPARD, RICHARD
452 FOREST GREEN DR.
TALLAHASSEE FL

☐ DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

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TITLE NAME STREET ADDRESS CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP

2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP

3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP

4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP

5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP

6.1 TITLE 6.2 NAME 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 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 the receiver or trustee 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

FL/1/97

900 513-5262

CR2E034 (9/96)