FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 JAN 26 PM 4:26

DOCUMENT # J12997 (9)

1. Corporation Name

GAYNOR, DECKER, YOUNG, MALCHON, DICKSON, SCHUMAKER & BERNSTEIN, P.A.

Principal Place of Business	Mailing Address
150 SECOND AVE., NO., SUITE 1700 ST. PETERSBURG FL 33701	150 SECOND AVE., NO., SUITE 1700 ST. PETERSBURG FL 33701

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 05/01/1986
3a. Date of Last Report: 03/08/1994

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

4. FEI Number: 59-2666776 ☐ 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

BRONSTEIN, JOEL D.
150 SECOND AVE., NO., SUITE 1700
ST. PETERSBURG FL 33701

10. Name and Address of New Registered Agent

81 Name: Dickson, V. James
82 Street Address (P.O. Box Number is Not Acceptable): 150 Second Ave. No. Suite 1700
83
84 City: St. Petersburg FL 85 Zip Code: 33733

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: V James Dickson, President (Signature, typed or printed name of registered agent and title if applicable.) (NOTE: Registered Agent signature required when reinstating) DATE: 1/16/95

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	1.1 TITLE	PD	☒ Change ☐ Addition
NAME	BRONSTEIN, JOEL D.	1.2 NAME		
STREET ADDRESS	150 SECOND AVE N #1700	1.3 STREET ADDRESS	Dickson, V. James 150 Second Ave. N. #1700	
CITY-ST-ZIP	ST. PETERSBURG FL	1.4 CITY-ST-ZIP	St. Petersburg, Fl.	
TITLE	D	2.1 TITLE	VPD	☒ Change ☐ Addition
NAME	DECKER, ROBERT C.	2.2 NAME	Bernstein, David S.	
STREET ADDRESS	150 SECOND AVE N #1700	2.3 STREET ADDRESS	150 Second Ave. N. #1700	
CITY-ST-ZIP	ST. PETERSBURG FL	2.4 CITY-ST-ZIP	St. Petersburg, Fl.	
TITLE	DVP	3.1 TITLE	TD	☒ Change ☐ Addition
NAME	ROBBINS, DAVID L.	3.2 NAME	Decker, Robert C.	
STREET ADDRESS	150 SECOND AVE N #1700	3.3 STREET ADDRESS	150 Second Ave. No. #1700	
CITY-ST-ZIP	ST. PETERSBURG FL	3.4 CITY-ST-ZIP	St. Petersburg, Fl.	
TITLE	DVP	4.1 TITLE	SD	☒ Change ☐ Addition
NAME	GAYNOR, JOSEPH W.	4.2 NAME	Schumaker, Robert S.	
STREET ADDRESS	150 SECOND AVE N #1700	4.3 STREET ADDRESS	150 Second Ave. No. #1700	
CITY-ST-ZIP	ST. PETERSBURG FL	4.4 CITY-ST-ZIP	St. Petersburg, Fl.	
TITLE	DVP	5.1 TITLE		☐ Change ☐ Addition
NAME	MALCHON, RICHARD H. JR.	5.2 NAME		
STREET ADDRESS	150 SECOND AVE N #1700	5.3 STREET ADDRESS		
CITY-ST-ZIP	ST. PETERSBURG FL	5.4 CITY-ST-ZIP		
TITLE	STD	6.1 TITLE		☐ Change ☐ Addition
NAME	CARLSON, SUSAN W	6.2 NAME		
STREET ADDRESS	150 2ND AVE N #1700	6.3 STREET ADDRESS		
CITY-ST-ZIP	ST PETERSBURG FL	6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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 supplemented 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: V James Dickson 1/16/95 813-895-1971
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL OFFICER OR DIRECTOR — Date — Daytime Phone #
V. James Dickson

0306870 CP