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Jan 23 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 # J17348

(0)

1. Corporation Name  
LANGER & THORNE, P.A.

Principal Place of Business

~~1896 PALM BEACH LAKES BLVD~~  
~~WEST PALM BEACH FL 33409~~  
US

Mailing Address

~~1896 PALM BEACH LAKES BLVD~~  
~~WEST PALM BEACH FL 33409-3543~~  
US



2. Principal Place of Business

21 4163 S. CONGRESS AVE.  
Suite, Apt. #, etc.

22 City & State

23 LAKE WORTH, FL

24 Zip 33461

25 Country USA

2a. Mailing Address

26 4163 S. CONGRESS AVE.  
Suite, Apt. #, etc.

27 City & State

28 LAKE WORTH, FL

29 Zip 33461

30 Country USA

3. Date Incorporated or Qualified

06/01/1986

3a. Date of Last Report

01/24/1996

4. FEI Number

59-2685161

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

LANGER, LAWRENCE J  
~~1896 PALM BEACH LAKES BLVD.~~  
~~WEST PALM BEACH FL 33409~~

10. Name and Address of New Registered Agent

81 Name Lawrence J. Langer  
82 Street Address (P.O. Box Number is Not Acceptable)  
4163 South Congress Avenue  
83  
84 City Lake Worth FL 85 Zip Code 33461

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 DP  
NAME LANGER, LAWRENCE  
STREET ADDRESS ~~1896 PALM BEACH LAKES BLVD.~~  
CITY-ST-ZIP ~~WEST PALM BEACH FL~~

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Lawrence J. Langer  
1.2 NAME 4163 South Congress Avenue  
1.3 STREET ADDRESS Lake Worth, FL 33461  
1.4 CITY-ST-ZIP

2.1 TITLE Secretary/Director  
2.2 NAME Patricia E. Thorne  
2.3 STREET ADDRESS 4163 S Congress Avenue  
2.4 CITY-ST-ZIP Lake Worth, FL 33461

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

PATRICIA E. THORNE

1/8/97

Date

Daytime Phone #

(561) 439-1600

CR2E034 (9/96)