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Apr 29 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # J27741 (4)
1. Corporation Name
PROFESSIONAL BUSINESS OWNER'S ASSOCIATION INC.



Principal Place of Business
1800 SECOND STREET
SUITE 909
SARASOTA FL 34236

Mailing Address
1800 SECOND STREET
SUITE 909
SARASOTA FL 34236-5992

3. Date Incorporated or Qualified
08/07/1986

3a. Date of Last Report
01/25/1996

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

28 Zip

24 Country

29 Country

4. FEI Number
59-2990067

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

LOVGREN, LORI A
% ADORNO & ZEDER
888 S.E. 3RD AVE., SUITE 500
FT. LAUDERDALE FL 33335-9002

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

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 DS ☐ DELETE

NAME INMAN, JACK

STREET ADDRESS 1800 SECOND ST, #909

CITY-ST-ZIP SARASOTA FL

TITLE DC ☐ DELETE

NAME HARRIS, WAYNE

STREET ADDRESS 1800 SECOND STREET, #909

CITY-ST-ZIP SARASOTA FL

TITLE DT ☒ DELETE

NAME MILLER, H. LINCOLN

STREET ADDRESS 1800 SECON ST. #909

CITY-ST-ZIP SARASOTA FL 34236

TITLE P ☒ DELETE

NAME SWINDELL, GEORGE B

STREET ADDRESS 1800 SECOND STREET, #909

CITY-ST-ZIP SARASOTA FL

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☒ Addition

1.2 NAME ROGER, MICHAEL T

1.3 STREET ADDRESS 1800 SECOND ST, #909

1.4 CITY-ST-ZIP SARASOTA, FL 34236

2.1 TITLE ☐ Change ☒ Addition

2.2 NAME TAYLOR, JEFFREY A.

2.3 STREET ADDRESS 1800 SECOND ST, #909

2.4 CITY-ST-ZIP SARASOTA FL 34236

3.1 TITLE ☐ Change ☒ Addition

3.2 NAME PRICE, RANSOM N.

3.3 STREET ADDRESS 1800 SECOND ST, #909

3.4 CITY-ST-ZIP SARASOTA FL 34236

4.1 TITLE ☐ Change ☒ Addition

4.2 NAME DIAL, C. FERRELL

4.3 STREET ADDRESS 1800 SECOND STREET, #909

4.4 CITY-ST-ZIP SARASOTA FL 34236

5.1 TITLE ☐ Change ☒ Addition

5.2 NAME DATERSON, JAMES C.

5.3 STREET ADDRESS 1800 SECOND STREET, #909

5.4 CITY-ST-ZIP SARASOTA FL 34236

6.1 TITLE ☐ Change ☐ Addition

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:

JEFFREY A TAYLOR

4/21/97

941 955 0793

CP2E034 (9/96)