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Feb 17 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 # J35953

(5)

1. Corporation Name
SCHWEITZER & ASSOCIATES, INC.

Principal Place of Business

1023 DUNDEE RD.
P.O. BOX 1798
DUNDEE FL 33838

Mailing Address

1023 DUNDEE RD.
P.O. BOX 1798
DUNDEE FL 33838-1798

3. Date Incorporated or Qualified
10/01/1986

3a. Date of Last Report
01/22/1996

2. Principal Place of Business

21 Suite, Apt. #, etc

23 City & State

24 Zip

Country

2a. Mailing Address

25 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

4. FEI Number

59-2730080

Applied For

Not Applicable

6. 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

JACKSON DEAN
1023 DUNDEE RD.
DUNDEE FL 33838-1798

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 ☐ DELETE

NAME TD
MERRITT, ANN
STREET ADDRESS 1023 DUNDEE RD
CITY- ST- ZIP DUNDEE FL

TITLE ☐ DELETE

NAME CD
JACKSON, DEAN
STREET ADDRESS 9418 WICKHAM WAY
CITY- ST- ZIP ORLANDO FL

TITLE ☐ DELETE

NAME PD
TAAFFE, R. KEVIN,
STREET ADDRESS 1023 DUNDEE RD.
CITY- ST- ZIP DUNDEE FL 33838-1798

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY- ST- ZIP

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

11 TITLE ☐ Change ☐ Addition

12 NAME

13 STREET ADDRESS

14 CITY- ST- ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY- ST- ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY- ST- ZIP

4.1 TITLE ☐ Change ☒ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY- ST- ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY- ST- ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY- ST- ZIP

S T

REBECCA K. SUTHERLAND

444 E. BELMAR, APT. 8

LAKELAND, FLORIDA 33803

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

REBECCA K. SUTHERLAND

2/11/97

941/439-3626

Date

Daytime Phone #

0383801

CR2E034 (9/96)