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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**CORPORATION
ANNUAL REPORT
1995**



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

DOCUMENT # J58225 (0)

1. Corporation Name
JOHN R. GEIGER, P.A.

Principal Place of Business Mailing Address
6300 ROYAL WOODS DRIVE S.W. FT. WATERS FL 33308 **6300 ROYAL WOODS DRIVE S.W. FT. WATERS FL 33308**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified **02/23/1987** 3a. Date of Last Report **04/28/1994**

4. FFL Number ~~60-277-1002~~ **65-0502460** 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. 122.032, Florida Statutes Yes No

2. Principal Place of Business 26. Mailing Address
21 **4475 US 1 South** 26 **4475 US 1 South**
Suite, Apt. #, etc. #406 Suite, Apt. #, etc. #406
22 **Saint Augustine FL** 27 **St. Augustine FL**
City & State City & State
24 **32086** 25 **USA** 29 **32086** 30 **USA**
Zip Country Zip Country

9. Name and Address of Current Registered Agent
**GEIGER, JOHN R.
19040 N W 57TH AVENUE #304
MIAMI FL 33015**

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable) **4475 US 1 South #406**
83
84 City **St. Augustine FL** 85 Zip Code **32086**

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 *John R. Geiger, Pres.* DATE **4/20/95**

12. OFFICERS AND DIRECTORS
TITLE **TSD**
NAME **GEIGER, JOHN**
STREET ADDRESS **19040 N W 57TH AVE #304**
CITY - ST - ZIP **MIAMI FL**
TITLE **P**
NAME **GEIGER, JOHN**
STREET ADDRESS **19040 N W 57TH AVE #304**
CITY - ST - ZIP **MIAMI FL**
NOTE: All addresses

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
11 TITLE Change Addition
12 NAME
13 STREET ADDRESS **4475 US 1 South #406**
14 CITY - ST - ZIP **St Augustine FL 32086**
21 TITLE Change Addition
22 NAME
23 STREET ADDRESS **4475 US 1 South #406**
24 CITY - ST - ZIP **St Augustine FL 32086**
31 TITLE Change Addition
32 NAME
33 STREET ADDRESS **4475 US 1 South, Suite 406**
34 CITY - ST - ZIP **St. Augustine, FL 32086**
41 TITLE Change Addition
42 NAME
43 STREET ADDRESS
44 CITY - ST - ZIP
51 TITLE Change Addition
52 NAME
53 STREET ADDRESS
54 CITY - ST - ZIP
61 TITLE Change Addition
62 NAME
63 STREET ADDRESS
64 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)(b), 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: *John R. Geiger, Pres* DATE **4/20/95**