

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **J58406** (6)

1. Corporation Name

SINGER & ZANE, P.A.



Principal Place of Business

**701 NORTHPOINT PKWY.
STE. 330
W. PALM BCH. FL 33407
US**

Mailing Address

**701 NORTHPOINT PKWY.
STE. 330
W. PALM BCH. FL 33407
US**

3. Date Incorporated or Qualified
02/23/1987

3a. Date of Last Report
06/08/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

4. FEI Number

59-2779503

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

10. Name and Address of New Registered Agent

**ZANE, JEFFREY P., ESQ.
701 NORTHPOINT PKWY.
STE. 330
W. PALM BCH. FL 33407**

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 or title if applicable

(Not for Registered Agent signature required when constituting)

DATE

12. OFFICERS AND DIRECTORS

TITLE **PST** ☐ DELETE
NAME **ZANE, JEFFREY**
STREET ADDRESS **7559 COURTYARD RUN WEST**
CITY-ST-ZIP **BOCA RATON FL**

TITLE **D** ☐ DELETE
NAME **ZANE, JEFFREY**
STREET ADDRESS **7559 COURTYARD RUN WEST**
CITY-ST-ZIP **BOCA RATON FL**

TITLE **VP** ☐ DELETE
NAME **DINGER, MICHAEL**
STREET ADDRESS **12811 MARSH POINTE WAY**
CITY-ST-ZIP **PALM BEACH FL**

TITLE **D** ☐ DELETE
NAME **SINGER, MICHAEL**
STREET ADDRESS **12811 MARSH POINTE WAY**
CITY-ST-ZIP **PALM BEACH GARDENS 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

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

**177 Satinwood Lane
Palm Beach Gardens, FL 33410**

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

**177 Satinwood Lane
Palm Beach Gardens, FL 33410**

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

SINGER, MICHAEL ☒ Change ☐ Addition

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

☐ Change ☐ Addition

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

☐ Change ☐ Addition

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ Change ☐ Addition

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)(k), 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

Date:

Daytime Phone #

4/10/96

407-471-1002

CR2E034 (12/95)