

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

**CORPORATION
ANNUAL REPORT
1995**



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

**APPROVED
AND
FILED**

DOCUMENT # J63791 (4)

1. Corporation Name

**PURMORT, MARTIN & CONTE LIFE ASSOCIATES, INC.
WILLIAM C. CONTE, INC.**

1995 MAY -1 AM 9:51

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

Principal Place of Business 2301 RINGLING BLVD. SARASOTA FL 34237	Mailing Address 2201 RINGLING BLVD. 201 SARASOTA FL 34237-6103 US
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3. Date Incorporated or Qualified 03/20/1987	3a. Date of Last Report 05/27/1994
4. FEI Number 59-2784803	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business 21 2201 Ringling Blvd. Suite, Apt. #, etc.	2a. Mailing Address 26 Suite, Apt. #, etc.
22 201 City & State	27 City & State
23 Sarasota, Florida	28
24 34237 Zip Country 25 Sarasota	29 Zip Country 30

9. Name and Address of Current Registered Agent

*** CONTE, WILLIAM C.
2301 RINGLING BLVD.
SUITE 600-
SARASOTA FL 34237**

10. Name and Address of New Registered Agent

81 Name William C. Conte
82 Street Address (P.O. Box Number is Not Acceptable) 2201 Ringling Blvd.
83 Suite 201
84 City Sarasota
85 Zip Code FL 34237

11. Pursuant to the provisions of Sections 607.0502 and 607.1908, 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 registering) DATE _____

12. OFFICERS AND DIRECTORS

TITLE D	NAME PURMORT, WELLS
STREET ADDRESS 2301 RINGLING BOULEVARD	
CITY-ST-ZIP SARASOTA FL	
TITLE D	NAME MARTIN, RICHARD
STREET ADDRESS 2301 RINGLING BOULEVARD	
CITY-ST-ZIP SARASOTA FL	
TITLE D	NAME CONTE, WILLIAM C.
STREET ADDRESS 2301 RINGLING BOULEVARD	
CITY-ST-ZIP SARASOTA FL	
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	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	Purmort, Wells - Delete
1.3 STREET ADDRESS	No longer Director
1.4 CITY-ST-ZIP	
2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	Martin, Richard - Delete
2.3 STREET ADDRESS	No longer Director
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	100001482701
4.3 STREET ADDRESS	-05/17/95 -01185-020
4.4 CITY-ST-ZIP	****200.00 ****200.00
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	20A
6.3 STREET ADDRESS	3-1-95
6.4 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: William C. Conte **William C. Conte, President 3/21/95 813-366-7596**