

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

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JAN 31 PM 2:35

DOCUMENT # J70614

(9)

1. Corporation Name

ALAN S. GASSMAN, P.A.

Principal Place of Business

Mailing Address

% ALAN S. GASSMAN
3023 FIRST AVENUE NORTH
ST. PETERSBURG FL 33713-0600

% ALAN S. GASSMAN
3023 FIRST AVENUE NORTH
ST. PETERSBURG FL 33713-0600

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

04/30/1987

3a. Date of Last Report

02/01/1994

4. FEI Number

59-2802600

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

2. Principal Place of Business

2a. Mailing Address

21 1245 Court Street

26 1245 Court Street

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 Suite 102

27 Suite 102

City & State

City & State

23 Clearwater, FL

28 Clearwater, FL

Zip

Country

Zip

Country

24 34616

25 USA

29 34616

30 USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

GASSMAN, ALAN S.
1212 COURT STREET, SUITE #B
CLEARWATER FL 34616

81 Name

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

1245 Court Street

Suite 102

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 registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	PD
NAME	GASSMAN, ALAN S.
STREET ADDRESS	1212 COURT STREET #B
CITY-ST-ZIP	CLEARWATER FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	1245 Court Street, Suite 102
1.4 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	

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 110.07(2)(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 used), or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

(Typed Name)

2

ALAN S. GASSMAN, P.A.
ATTORNEYS AT LAW

ALAN S. GASSMAN*
TAMI F. CONETTA

*LL.M. IN TAXATION
BOARD CERTIFIED IN
ESTATE PLANNING AND
PROBATE LAW

1245 COURT STREET
SUITE 102
CLEARWATER, FLORIDA 34616
TELEPHONE: (813) 442-1200
FAX: (813) 443-5829

January 24, 1995

Division of Corporations
Annual Reports Section
Post Office Box 1500
Tallahassee, FL 32302-1500

Dear Sirs:

Please find enclosed the 1995 Annual Report Form for Alan S. Gassman, P.A. Also enclosed is our check in the amount of \$200.00 for the filing fee.

Very truly yours,


Alan S. Gassman

ASG:saw
Enclosures
Gassman\Correspo\AnnRept.ASG
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