

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED

Apr 11 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **J74055**

(1)

1. Corporation Name

PROFESSIONALS TRUST, INC.

Principal Place of Business

**2650 STATE ROAD 84
SUITE 103
FT. LAUDERDALE FL 33312
US**

Mailing Address

**2650 STATE ROAD 84
103
FT. LAUDERDALE FL 33312-4830
US**

3. Date Incorporated or Qualified

05/20/1987

3a. Date of Last Report

04/09/1996

4. FEI Number

65-0061240

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

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**LAPORTE, DR L L
2650 SR 84
SUITE G105
FT LAUDERDALE FL 33312**

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, type or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12.

OFFICERS AND DIRECTORS

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE

DP

☐ DELETE

NAME

LAPORTE, DR. LORA L.

STREET ADDRESS

2650 STATE ROAD 84

CITY - ST - ZIP

FT. LAUDERDALE FL

TITLE

D

☐ DELETE

NAME

LAPORTE, DR. JOHN A.

STREET ADDRESS

2650 STATE ROAD 84

CITY - ST - ZIP

FT. LAUDERDALE FL

TITLE

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