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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996
DOCUMENT #

J80462

(1)

NAPIER & NAPIER, INC.

Principal Place of Business	Mailing Address
19036 Brewer RD. Land O Lakes FL 34639	19036 BREWER RD. LAND O LAKES FL 34639



2. Principal Place of Business 2a Mailing Address					3. Date Incorporated or Qualified 06/30/1987	3a. Date of Last Report 02/08/1995	
2. Frincipal   21	FRICE OF BUSINESS	2a. Mailing Address			4. FEI Number 59-2819962		Applied For
Suite, Apl	l. #, etc.	Suite, Apt. #, etc.					Not Applicable
22		27			5. Certificate of Status Desired		\$8.75 Additional Fee Required
City & Sta 23	ale	Orty & State			Election Campaign Financing     Trust Fund Contribution		\$5.00 May Be Added to Fees
2(p) 2 <b>4</b> ]	Country 25	Zip	Count	ry	8. This corporation has liability for		
	9. Name and Address of Curren	29 t Registered Agent	30			s 🗌 No	
			8	1 Name	10. Name and Address of New	registered A	igent
NAPIE	R, RUSSELL L., JR.						
	BREWER ROAD		В	2 Street	Address (P.O. Box Number is Not Accepta	ble)	
	O'LAKES FL 34639		8	3			
			8	4 City			85 Zip Code
44 5				1	orporation submits this statement for the pu	FL	1 1 '
	with, and accept the obligations of, Section of Section of the Sec	on contocco, nonde clateles.			orporation submits this statement for the pu- board of directors. I hereby accept the app required when renstating	DATE	Spotored agent. 1 at it
12.	OFFICERS AND	DIRECTORS	13.	on agracic	ADDITIONS/CHANGES TO OFF		DIRECTORS IN 12
IFLE	PD	☐ DELETE	1 1 11/1				Change Addition
IAME	NAPIER, RUSSELL L. JR		1.2 NAM			_	- •
THEET ADDRESS			1.3 STREI	I ADDRESS			
ITY - \$1 - ZIP	LAND O LAKES FL		1.4 CITY -	ST-ZIP			
111.6	STD STOAN K	DELETE	2 171718			Г	Change
IAME TOTAL LINDOGOS	NAPIER, SUSAN K. 19036 BREWER RD.		2.2 NAME				
TREET ADDRESS	LAND O LAKES FL			T ADDRESS			
HTY ST-ZIF	LAITO O LARES FL	DELETE	2.4 CITY -	· · · · · · · · · · · · · · · · · · ·		- <del>-</del>	
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THEFT ADDRESS			43 STREE	T ADDRESS			
11 Y - S1 - Z1F			4.4 City-	ST-ZIP			
ILE		☐ DELETE	5 1 TITLE				Change Addition
AMF			5.2 NAME				
TREET ADORESS			5 3 STREE	T ADDRESS			
17Y - ST - 7IP			54 CITY-	ST-ZIP			
ILE		□ DELETE	6. 1 TITLE				Change
AME			6.2 NAME				
TREET ADDRESS				1 ADDRESS			-
CITY - ST - ZIF	<u> </u>		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)(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: Bussell J. Napier

2-18-96 (813) 996-7603