

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

APPROVED
AND
FILED

1996 AUG 27 AM 11:16

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # J99899
1. Corporation Name

SPEARS + SPEARS, INC.

Principal Place of Business Mailing Address

46 S.W. RIVERWAY BLVD.
PALM CITY, FL. 34990

400001941724
-03/09/96--01002--018

****225.00 ****225.00

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 P.O. BOX 620

22 City & State

27 City & State

23 Zip

Country

28 34991

Country

29 MARTIN

30

3. Date Incorporated or Qualified

3a. Date of Last Report

12-31-87

5-95

4. FLL Number

65-0018016

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

DORIS H. SPEARS
46 SW RIVERWAY BLVD.
PALM CITY, FL. 34990

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 provisions of Section 607.0505, Florida Statutes.

SIGNATURE

Doris H. Spears

8-6-96

12. OFFICERS AND DIRECTORS

TITLE PRESIDENT-SEC.-TREAS. [] DELETE
NAME DORIS H. SPEARS
STREET ADDRESS 46 SW RIVERWAY BLVD.
CITY-STATE-ZIP PALM CITY, FL. 34990

TITLE [] DELETE
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE [] DELETE
NAME
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CITY-STATE-ZIP

TITLE [] DELETE
NAME
STREET ADDRESS
CITY-STATE-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE [] Change [] Addition
12 NAME
13 STREET ADDRESS
14 CITY-STATE-ZIP [] Change [] Addition

21 TITLE [] Change [] Addition
22 NAME
23 STREET ADDRESS
24 CITY-STATE-ZIP [] Change [] Addition

31 TITLE [] Change [] Addition
32 NAME
33 STREET ADDRESS
34 CITY-STATE-ZIP [] Change [] Addition

41 TITLE [] Change [] Addition
42 NAME
43 STREET ADDRESS
44 CITY-STATE-ZIP [] Change [] Addition

51 TITLE [] Change [] Addition
52 NAME
53 STREET ADDRESS
54 CITY-STATE-ZIP [] Change [] Addition

61 TITLE [] Change [] Addition
62 NAME
63 STREET ADDRESS
64 CITY-STATE-ZIP [] Change [] Addition

SCC 8-27-96

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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 or change list or on an attachment with an address.

SIGNATURE:

Doris H. Spears Pres

8-6-96

407-288-2787

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (3/96)