FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

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

APPROVED AND FILED
95 MAR 23 AM 10:34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # K03266 (9)

1. Corporation Name
POWELL, CARNEY, MOORE, HUCKS & OLSON, P.A.

Principal Place of Business	Mailing Address
~~BARNETT TOWER, ONE PROGRESS PLAZA #1210~~	~~BARNETT TOWER, ONE PROGRESS PLAZA #1210~~
~~POBOX 31689~~	~~POBOX 31689~~
~~ST PETERSBURG FL 33732-9685~~	~~ST PETERSBURG FL 33731-9685~~

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 11/23/1987	3a. Date of Last Report: 03/01/1994
2. Principal Place of Business: 21 One Progress Plaza; 22 Barnett Tower, Suite 1210; 23 St. Petersburg, FL; 24 33701; 25 Pinellas	2a. Mailing Address: 26 Post Office Box 1689; 27 Suite, Apt. #, etc.; 28 St. Petersburg, FL; 29 33731-1689; 30 Pinellas
4. FEI Number: 59-2858385	☐ 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

POWELL, JAMES N.
BARNETT TOWER
ONE PROGRESS PLAZA, SUITE 1210
ST. PETERSBURG FL 33701

10. Name and Address of New Registered Agent

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when restating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D POWELL, JAMES N. 6677 EMERSON AVE. S. ST. PETERSBURG FL	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	D GILES, JOEL B. 626 17TH AVENUE NORTHEAST ST. PETERSBURG, FL 33704 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D CARNEY, MARY JO 621 BAY LAUREL COURT NE ST. PETERSBURG FL	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	FITZGERALD, BRIAN T. 4702 CLEAR AVENUE TAMPA, FL 33629 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MOORE, S. HELEN 129 BAY POINT DR. NE ST. PETERSBURG FL	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D HUCKS, JOHN C. 129 BAY POINT DR. NE ST. PETERSBURG FL	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D OLSON, STEWART O. 105 4TH STREET, N. #419 ST. PETERSBURG FL	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP	☐ Change ☐ Addition

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)(i), 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: _____ President 03/20/95 (813) 898-9011
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #
James N. Powell