## 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

MENT # K06275

(7)

DOCUMENT #

1. Corporation Name

SMITH, RILEY & DEMPSEY, P.A.

120 E.GEORGIA AVENUE P.O.BOX 638 DELAND FL 32721-7638

Principal Place of Business

120 E.GEORGIA AVENUE P.O.BOX 638 DELAND FL 32721-7638

| DELAND FL 32721-7638 |  |                           | DELAND FL 32721-7638                         |       |                |                            | Date Incorporated or Qualified     12/10/1987  |              |                                | 3a. Date of Last Report 04/13/1995 |                               |  |
|----------------------|--|---------------------------|--|-------|----------------|----------------------------|--|--------------|--------------------------------|------------------------------------|-------------------------------|--|
| 2.                   | Principal Place of Business                            | ~                         | 2a. Mailing Address                          |       |                | 4. FEI Number<br>59-285644 |  |              |                                |                                    | Applied For<br>Not Applicable |  |
|                      | Suite, Apt. #, etc.                                    | 2                         | Suite, Apt. #, etc.                          |       |                |                            | 5. Certificate of State  |              | \$8.75 Additional Fee Required |                                    |                               |  |
|                      | City & State   |                           | City & State                                 |       |                |                            | Election Campaigi     Trust Fund Contri  | -            | \$5.00 May Be Added to Fees    |                                    |                               |  |
| 24                   | Zip 2  | Country                   | Zip  | 30 Co | ountry         |                            | R. This corporation has liability for intangible tax under s 199.032,     Florida Statutes Yes  No |              |                                |                                    |                               |  |
| -                    |  | rid Address of Current Re | 10. Name and Address of New Registered Agent |       |                |                            |  |              |                                |                                    |                               |  |
|                      | PALMETTO CHARTE<br>150 MAGNOLIA AVI<br>DAYTONA BEACH I | ENUE                      |  |       | 81<br>82<br>83 | Name<br>Street Addres      | <sub>SS</sub> (P.O. Box Number is  | Not Acceptab | łe)                            |                                    |                               |  |

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.

City

| SIGNATURE _     | igrature, typed or matter thanks or registered by | NOTE: Registered Agent signature require | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 |
|-----------------|---|--|---|
| 12.             | OFFICERS AND DIRECTORS                            | 13.                                      | Change Addition                                   |
| TITLE           | PD DELETE   | 1. 1 TITLE                               |   |
| NAME            | SMITH, JEFFREY T.                                 | 1.2 NAME                                 |   |
| STREET ADDRESS  | 120 EAST GEORGIA AVENUE                           | 1.3 STREFT ADDRESS                       |   |
| CITY-ST-ZIP     | DELAND FL.  | 1.4 CITY-ST-ZIP                          | ☐ Change ☐ Addition                               |
| TITLE           | STD DELETE  | 2 1 TITLE                                | ☐ Change ☐ Addition                               |
| NAME:           | RILEY, CHARLES E.                                 | 2.2 NAME                                 |   |
| STREET ADDRESS  | 120 EAST GEORGIA AVENUE                           | 2.3 STREET ADDRESS                       |   |
| CITY-ST-ZIP     | DELAND FL   | 2 4 CITY - ST - ZIP                      |   |
| TITLE           | VT DELETE   | 3. 1 TITLE                               | ☐ Change ☐ Addition                               |
| NAME            | RILEY, CHARLES E.                                 | 3.2 NAME                                 |   |
| STREET ADDRESS  | 120 EAST GEORGIA AVENUE                           | 3 3 STREET ADDRESS                       |   |
| CHY-ST-ZIP      | DELAND FL   | 3 4 CITY - ST - ZIP                      |   |
| TITLE           | VSD DELETE  | 4. 1 TITLE                               | Change Addition                                   |
| NAME            | DEMPSEY, DONALD B.                                | 4.2 NAME                                 |   |
| STREET ADDRESS  | 120 EAST GEORGIA AVENUE                           | 4.3 STREET ADDRESS                       |   |
|                 | DELAND FL   | 4 4 CITY - ST - ZIP                      |   |
| CITY - ST - ZIP | DELETE  | 5 1 TITLE                                | Charge Addition                                   |
| NAME            |   | 5 2 NAME                                 |   |
|                 |   | 5.3 STREET ADDRESS                       |   |
| STREET ADDRESS  |   | 5.4 CITY - ST - ZIP                      |   |
| CITY - ST - ZIP | DELETE  | 6.1 TITLE                                | ☐ Change ☐ Addition                               |
| TITLE           |   | 62 NAME                                  |   |
| NAME            |   |  |   |
| STREET ADDRESS  |   | 63 STREET ADDRESS                        |   |
| City-ST-ZIP     |   | 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 cath; 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:

THE AND TYPED ON PHINISH NAME OF SIGNING OFFICER OR DIRECTOR

4/26/96 (904)734-3576

Zip Code

85