

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **K41143**

(4)

1. Corporation Name

GEORGE L. HAYES III, P.A.



Principal Place of Business

Mailing Address

C/O GEORGE L. HAYES III
696 FIRST AVE. NO. STE. 303
ST. PETERSBURG FL 33701

C/O GEORGE L. HAYES III
696 FIRST AVE. NO. STE. 303
ST. PETERSBURG FL 33701

2. Principal Place of Business

2a. Mailing Address

21 **1 Progress Plaza**

26 **Sameas 2**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 **Suite 1210**

27

City & State

City & State

23 **St. Petersburg Florida**

28

Zip

Country

Zip

Country

24 **33701**

25 **USA**

29

30

g. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

HAYES, GEORGE L., III
696 FIRST AVENUE NORTH
SUITE 303
ST. PETERSBURG FL 33701

81 Name **George L. Hayes III Services INC**
82 Street Address (P.O. Box Number is Not Acceptable)
1 Progress Plaza
83 **Suite 1210**
84 City **St. Petersburg** FL 85 Zip Code **33701**

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 typed or printed name of registered agent and date of signature

(NOTE: Registered Agent signature required when reappointing)

DATE

12.

OFFICERS AND DIRECTORS

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DP
HAYES, GEORGE L., III
696 FIRST AVE. NO. #303
ST. PETERSBURG FL

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
1 Progress Plaza Suite 1210
St. Petersburg FL 33701

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
800001829898
-05/20/96--01058--023
*****600.00**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

GEORGE L. HAYES III, Pres. **4/29/96** **(813) 898 9011**
SG 5-1-96

CR2E034 (12/95)