

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **K48253** (4)

1. Corporation Name

DAVID & MORROW, P.A.



Principal Place of Business

% JEFFERSON W. MORROW
2501 GULF LIFE TOWER, 1301 GULF LIFE DR
JACKSONVILLE FL 32207

Mailing Address

% JEFFERSON W. MORROW
2501 GULF LIFE TOWER, 1301 GULF LIFE DR
JACKSONVILLE FL 32207

3. Date Incorporated or Qualified

11/15/1988

3a. Date of Last Report

05/01/1955

2. Principal Place of Business

2a. Mailing Address

21 **1301 Gulf Life Dr**

26 **1301 Gulf Life Dr**

4. FEI Number

59-2918783

Applied For

Not Applicable

22 **2600 Gulf Life Tower**

27 **2600 Gulf Life Tower**

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

23 **Jax, Fla**

28 **Jax, Fla**

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

24 **32207**

25 **USA**

29 **32207**

30 **USA**

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

MORROW, JEFFERSON W.
2501 GULF LIFE TOWER
1301 GULF LIFE DRIVE
JACKSONVILLE FL 32207

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

(Signature type and printed name of registered agent and filer if applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE

NAME
DAVID, RAYMOND A., JR.
2501 GULF LIFE TOWER
JACKSONVILLE FL

☐ DELETE

TITLE

NAME
MORROW, JEFFERSON W.
2501 GULF LIFE TOWER
JACKSONVILLE FL

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 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

2-7-96

(904)399-5626

Date

Daytime Phone #

CR2E034 (12/95)