

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

**CORPORATION
ANNUAL REPORT
1995**



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

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS**

95 APR 10 PM 2: 05

DOCUMENT # K74866

(0)

1. Corporation Name

RICHARD G. HANSCOM, P.A.

Principal Place of Business

**C/O RICHARD G. HANSCOM
P O BOX 752
MARCO ISLAND FL 33969-7752**

Mailing Address

**C/O RICHARD G. HANSCOM
P O BOX 752
MARCO ISLAND FL 33969-7752**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

03/23/1989

3a. Date of Last Report

06/28/1994

4. FEI Number

65-0115457

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

2. Principal Place of Business

21 222 Royal Palm Drive

2a. Mailing Address

26 1513 Bermuda Road

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22
City & State

27
City & State

23 Marco Island, FL

28 Marco Island, FL

Zip Country

Zip Country

24 33937

25

29 33937

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**HANSCOM, RICHARD G.
222 ROYAL PALM DRIVE
MARCO ISLAND FL 33937**

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, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

**TITLE D
NAME HANSCOM, RICHARD G.
STREET ADDRESS 222 ROYAL PALM DRIVE
CITY-ST-ZIP MARCO ISLAND FL**

**1 1 TITLE
12 NAME
13 STREET ADDRESS
14 CITY - ST - ZIP**

☐ Change ☐ Addition

**TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP**

**2 1 TITLE
22 NAME
23 STREET ADDRESS
24 CITY - ST - ZIP**

☐ Change ☐ Addition

**TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP**

**3 1 TITLE
32 NAME
33 STREET ADDRESS
34 CITY - ST - ZIP**

☐ Change ☐ Addition

**TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP**

**4 1 TITLE
42 NAME
43 STREET ADDRESS
44 CITY - ST - ZIP**

☐ Change ☐ Addition

**TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP**

**5 1 TITLE
52 NAME
53 STREET ADDRESS
54 CITY - ST - ZIP**

☐ Change ☐ Addition

**TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP**

**6 1 TITLE
62 NAME
63 STREET ADDRESS
64 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 110.07(3)(b), 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: Richard G. Hanscom

Richard G. Hanscom

4/5/95

(813) 394-2424