

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED

**Apr 25 1997 8:00am
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # K93092 (0)

1. Corporation Name
GENE S. BONHAM, C.P.A., P.A.



Principal Place of Business 1401 UNIVERSITY DRIVE STE 605 CORAL SPRINGS FL 33071	Mailing Address 1401 UNIVERSITY DRIVE STE 605 CORAL SPRINGS FL 33071-6088
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3. Date Incorporated or Qualified 06/05/1989	3a. Date of Last Report 04/02/1996
4. FEI Number 65-0147917	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

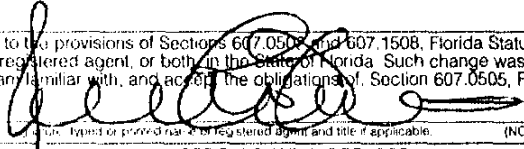
2. Principal Place of Business 21 1999 N. UNIVERSITY DR. Suite, Apt. #, etc 22 212	2a. Mailing Address 26 1999 N. UNIVERSITY DR. Suite, Apt. #, etc 27 212
City & State 23 CORAL SPRINGS, FL	City & State 28 CORAL SPRINGS, FL
Zip 24 33071 Country 25 U.S.A.	Zip 29 33071 Country 30 U.S.A.

9. Name and Address of Current Registered Agent
**COUGHLIN, CASEY WILLIAM
1401 UNIVERSITY DRIVE
SUITE 600
CORAL SPRINGS FL 33071**

10. Name and Address of New Registered Agent

81 Name ROBERT A. WHITE
82 Street Address (P.O. Box Number is Not Acceptable) 1401 UNIVERSITY DR SUITE
83 SUITE 600
84 City CORAL SPRINGS
85 Zip Code FL 33071

11. Pursuant to the provisions of Sections 607.0505 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:  **ROBERT A. WHITE** DATE: **4/18/97**

(NOTE: Registered Agent signature required when reinstating)

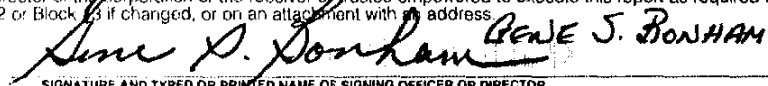
12. OFFICERS AND DIRECTORS

TITLE D	<input type="checkbox"/> DELETE
NAME BONHAM, GENE S.	
STREET ADDRESS 1401 UNIVERSITY DR #600	
CITY- ST- ZIP CORAL SPRINGS FL	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY- ST- ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME 1999 UNIVERSITY DR # 212
1.3 STREET ADDRESS CORAL SPRINGS, FL 33071
1.4 CITY- ST- ZIP
2.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY- ST- ZIP
3.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY- ST- ZIP
4.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY- ST- ZIP
5.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY- ST- ZIP
6.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY- ST- ZIP

14. I do hereby certify that the information supplied with this filing 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:  **GENE S. BONHAM** DATE: **1/7/97** (954) 753-6966

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (9/96)