

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

**APPROVED
AND
FILED**

95 APR 10 PM 1:26

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION ANNUAL REPORT 1995



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

DOCUMENT # **L10643** (9)

1. Corporation Name
JONES, WILSON, VALLEJO ASSOCIATES, P.A.

Principal Place of Business: **4335 HIGHLAND PARK BLVD. LAKELAND FL 33813**

Mailing Address: **4335 HIGHLAND PARK BLVD. LAKELAND FL 33813**

DO NOT WRITE IN THIS SPACE.

2. Principal Place of Business: **21**

2a. Mailing Address: **26**

22. Suite, Apt. #, etc.: **27**

23. City & State: **28**

24. Zip: **25** Country: **29**

3. Date Incorporated or Qualified: **08/18/1989**

3a. Date of Last Report: **03/14/1994**

4. FEI Number: **59-2083238**

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

9. Name and Address of Current Registered Agent

**VALLEJO, SERGIO R.
875 HANOVER WAY
LAKELAND FL 33813**

10. Name and Address of New Registered Agent

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83.

84. City

85. Zip Code: **FL**

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: _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE: _____

12. OFFICERS AND DIRECTORS

TITLE	D
NAME	VALLEJO, SERGIO R.
STREET ADDRESS	875 HANOVER WAY
CITY - ST - ZIP	LAKELAND FL
TITLE	D
NAME	JONES, RANDY P
STREET ADDRESS	5819 HOLLYHOCK DRIVE
CITY - ST - ZIP	LAKELAND FL
TITLE	D
NAME	WILSON, THOMAS A
STREET ADDRESS	4660 SHERWOOD LANE
CITY - ST - ZIP	LAKELAND FL
TITLE	D
NAME	JONES, RANDY P
STREET ADDRESS	5819 HOLLYHOCK DRIVE
CITY - ST - ZIP	LAKELAND FL
TITLE	D
NAME	WILSON, THOMAS A
STREET ADDRESS	4660 SHERWOOD LANE
CITY - ST - ZIP	LAKELAND FL
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
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 checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	5101 Lake In The Woods Blvd.
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 checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	5101 Lake In The Woods Blvd.
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 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 addition.

SIGNATURE: Bandy P. Jones *Bandy P. Jones* **4/4/95** **813 6443571**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNER OF BLOCK 12 OR DIRECTOR