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

FILED
Apr 15 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT
**1997**

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

DOCUMENT # **L17631** **(7)**

1. Corporation Name
**ROBISON, WILSON & ASSOCIATES, INC.**

| Principal Place of Business | Mailing Address |
|---|---|
| 550 PARK SHORE DRIVE<br>NAPLES FL 33940 | 550 PARK SHORE DRIVE<br>NAPLES FL 34103-3537 |

3. Date Incorporated or Qualified: 09/22/1989
3a. Date of Last Report: 05/01/1996

2. Principal Place of Business
21 5020 Tamiami Tr N
Suite, Apt. #, etc.
22 200
City & State
23 Naples Fl
Zip 24 34103 Country 25

2a. Mailing Address
26 853 Vanderbilt Beach Rd
Suite, Apt. #, etc.
27 # 348
City & State
28 Naples Fl
Zip 29 34108 Country 30

4. FEI Number: 65-0147213 ☐ 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
**ROBISON, STEPHEN V.**
**550 PARK SHORE DRIVE**
**NAPLES FL 33940**

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable): 853 Vanderbilt Beach Rd
83 Suite #348
84 City: Naples FL 85 Zip Code: 34108

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 _____ DATE
Signature, typed or printed name of registered agent and title, if applicable (NOTE: Registered Agent signature required when reinstating)

| 12. OFFICERS AND DIRECTORS | | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | | |
|---|---|---|---|---|---|
| TITLE | PD | ☐ DELETE | 1.1 TITLE | | ☐ Change ☐ Addition |
| NAME | ROBISON, STEPHEN V. | | 1.2 NAME | | |
| STREET ADDRESS | 5811 PELICAN BAY BLVD. | | 1.3 STREET ADDRESS | 853 Vanderbilt Beach Rd # 348 | |
| CITY-ST-ZIP | NAPLES FL | | 1.4 CITY-ST-ZIP | Naples Fl 34108 | |
| TITLE | VD | ☐ DELETE | 2.1 TITLE | | ☐ Change ☐ Addition |
| NAME | WILSON, JOHN E. | | 2.2 NAME | | |
| STREET ADDRESS | 5811 PELICAN BAY BLVD. | | 2.3 STREET ADDRESS | 853 Vanderbilt Beach Rd #348 | |
| CITY-ST-ZIP | NAPLES FL | | 2.4 CITY-ST-ZIP | Naples Fl 34108 | |
| TITLE | STD | ☐ DELETE | 3.1 TITLE | | ☐ Change ☐ Addition |
| NAME | ROBISON, LOLA G. | | 3.2 NAME | | |
| STREET ADDRESS | 5811 PELICAN BAY BLVD. | | 3.3 STREET ADDRESS | 853 Vanderbilt Beach Rd # 348 | |
| CITY-ST-ZIP | NAPLES FL | | 3.4 CITY-ST-ZIP | Naples Fl 34108 | |
| TITLE | | ☐ DELETE | 4.1 TITLE | | ☐ Change ☐ Addition |
| NAME | | | 4.2 NAME | | |
| STREET ADDRESS | | | 4.3 STREET ADDRESS | | |
| CITY-ST-ZIP | | | 4.4 CITY-ST-ZIP | | |
| TITLE | | ☐ DELETE | 5.1 TITLE | | ☐ Change ☐ Addition |
| NAME | | | 5.2 NAME | | |
| STREET ADDRESS | | | 5.3 STREET ADDRESS | | |
| CITY-ST-ZIP | | | 5.4 CITY-ST-ZIP | | |
| TITLE | | ☐ DELETE | 6.1 TITLE | | ☐ Change ☐ Addition |
| NAME | | | 6.2 NAME | | |
| STREET ADDRESS | | | 6.3 STREET ADDRESS | | |
| CITY-ST-ZIP | | | 6.4 CITY-ST-ZIP | | |

CR2E034 (9/96)

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 _____