

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

FILED  
Feb 23 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



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

DOCUMENT # L19836

1. Corporation Name

CAMPBELL, GRIFFIN, ROGERS, STUART, MILLIKIN, & E  
NOLAN, P.A.

(PLEASE  
REMOVE  
ENGLAND)

Principal Place of Business

581 S DUNCAN AVE  
CLEARWATER FL 34616

Mailing Address

581 S DUNCAN AVE  
CLEARWATER FL 34616

NC  
12/31/97



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

33756

Country

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

33756

Country

30

9. Name and Address of Current Registered Agent

ROGERS, ROBERT R.  
581 S DUNCAN AVE  
CLEARWATER FL 34616

3. Date Incorporated or Qualified

09/28/1989

4. FEI Number

59-2967668

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 owes or has paid the current year Intangible  
Personal Property Tax due June 30.

☒ Yes

☐ No

10. Name and Address of New Registered Agent

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 reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

D  
ENGLAND, VIRGINIA G  
12300 6TH STREET E  
TREASURE ISLAND FL

☒ DELETE

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

D  
GRIFFIN, RAYMOND E.  
415 ORANGEVIEW AVE  
CLEARWATER FL

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

D  
ROGERS, ROBERT R.  
2219 HARN BLVD  
CLEARWATER FL

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

D  
STUART, RODERICK B.  
1539 RIDGEWOOD STREET  
CLEARWATER FL

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

D  
MILLIKIN, JEAN E  
13150 87TH PLACE NORTH  
SEMINOLE FL

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

☐ Change

☐ Addition

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

☒ Change

☐ Addition

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

☐ Change

☐ Addition

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

☐ Change

☐ Addition

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

☐ Change

☐ Addition

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ Change

☐ Addition

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\*\*\*150.00

PE 2.23

14. I 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

Robert R. Rogers

2/16/98

813-446-1706

CR2E034 (10/97)