

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

DOCUMENT # L28866 (6)

1. Corporation Name

MATHEWS SMITH RAILEY & DECUBELLIS, P.A.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 MAR 14 AM 8:11

Principal Place of Business

C/O LILBURN R. RAILEY III
255 S ORANGE AVENUE, #801
ORLANDO FL 32801

Mailing Address

C/O LILBURN R. RAILEY III
255 S ORANGE AVENUE, #801
ORLANDO FL 32801

DO NOT WRITE IN THIS SPACE.

2. Principal Place of Business

21 State, Apt. #, etc.

22 City & State

23 Zip

24 Country

2a. Mailing Address

26 State, Apt. #, etc.

27 City & State

28 Zip

29 Country

3. Date Incorporated or Qualified
11/13/1989

3a. Date of Last Report
04/15/1994

4. FEI Number
59-2986719

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

RAILEY, LILBURN R. III
255 SOUTH ORANGE AVENUE
SUITE 801
ORLANDO 32801

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 this 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 of Registered Agent or Registered Agent and the Corporation

NOTE: Registered Agent signature required when filing

DATE

12. OFFICERS AND DIRECTORS

1. TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
D
MATHEWS, LAWRENCE G. JR.
255 S ORANGE AVE #801
ORLANDO FL

2. TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
D
SMITH, MAURA T.
255 S ORANGE AVE #801
ORLANDO FL

3. TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
D
RAILEY, LILBURN R. III
255 S ORANGE AVE #801
ORLANDO FL

4. TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

5. TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

6. TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP
D/P ☒ Change ☐ Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP
D/VP ☒ Change ☐ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP
D/S/T ☒ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP
D ☐ Change ☒ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP
DecUBELLIS, DANIEL L.
255 S ORANGE AVE #801
ORLANDO FL ☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

7.1 TITLE
7.2 NAME
7.3 STREET ADDRESS
7.4 CITY - ST - ZIP

8.1 TITLE
8.2 NAME
8.3 STREET ADDRESS
8.4 CITY - ST - ZIP

9.1 TITLE
9.2 NAME
9.3 STREET ADDRESS
9.4 CITY - ST - ZIP

14. I hereby certify that the information supplied with this filing is accurately furnished and does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information is true and correct and that my signature shall have the same legal effect as if made under oath. I am an officer or director of the corporation or the registered agent or authorized to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 of this report, or in an attachment with this report.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/7/95

(07)822-2800