

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # L56091 (6)

1. Corporation Name

SHIRER & ASSOCIATES OF FLORIDA, INC.



Principal Place of Business

6801 DIANA CT.
TAMPA FL 33610
US

Mailing Address

6801 DIANA CT.
TAMPA FL 33610
US

2. Principal Place of Business

2a. Mailing Address

21 1367 Oakfield Dr
Suite, Apt. #, etc.

26 PO Box 2657
Suite, Apt. #, etc.

22 City & State
Brandon, FL

27 City & State
Brandon, FL

23 Zip 33511 Country U.S.

28 Zip 33509 Country U.S.

24 33509 25 33509

29 33509 30 33509

9. Name and Address of Current Registered Agent

WEAR, JOE T JR
6801 DIANA CT
TAMPA FL 33610

81 Name

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

1367 Oakfield Drive

83

84 City

Brandon

FL

85 Zip Code

33509-2657

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

(If/If/If Registered Agent, sign in registered office jurisdiction)

DATE

12. OFFICERS AND DIRECTORS

TITLE PS WEAR, JOE T ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP
6801 DIANA CT.
TAMPA FL 33610

TITLE V SHIRER, ANNE ☒ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP
6801 DIANA CT.
TAMPA FL 33610

TITLE T SHIRER, ROBERT L ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP
14521 WALSINGHAM ROAD
LARGO FL 33610

TITLE ☐ DELETE

TITLE ☐ DELETE

TITLE ☐ DELETE

TITLE ☐ DELETE

TITLE ☐ DELETE

TITLE ☐ DELETE

TITLE ☐ DELETE

TITLE ☐ DELETE

TITLE ☐ DELETE

TITLE ☐ DELETE

TITLE ☐ DELETE

TITLE ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

1367 Oakfield Dr.
Brandon, FL 33509

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 119.07(3)(k), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/29/96

(813) 653-9400

CR2E034 (12/95)