FILE NOW: FILING FEE AFTER MAY 1 IS $550.00

FILED
Jun 03 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 # **L69399** (8)

1. Corporation Name
DOUGLAS L. ROBERTS, P.A.

Principal Place of Business	Mailing Address
SUITE 910 TRADE CENTRE SOUTH 100 WEST CYPRESS CREEK RD FT. LAUDERDALE FL 33309 US	SUITE 910 TRADE CENTRE SOUTH 100 WEST CYPRESS CREEK RD FT. LAUDERDALE FL 33309-2181 US

3. Date Incorporated or Qualified: 04/30/1990
3a. Date of Last Report: 05/01/1996

2. Principal Place of Business
21: Suite 411 Lake Wyman
22: 2424 N. Federal Hwy
23: Boca Raton FL
24 Zip: 33432
25 Country: Palm B

2a. Mailing Address
26: P.O. Box 1836
27: Suite, Apt. #, etc.
28: Boca Raton FL
29 Zip: 33429
30 Country: Palm B

4. FEI Number: 65-0194217 ☐ 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

ROBERTS, DOUGLAS L.
SUITE 910 TRADE CENTRE SOUTH
100 WEST CYPRESS ROAD
FT. LAUDERDALE FL 33309

10. Name and Address of New Registered Agent

81 Name: Douglas L. Roberts
82 Street Address (P.O. Box Number is Not Acceptable): Suite 411 Lake Wyman Plaza
83: 2424 N. Federal Hwy
84 City: Boca Raton FL 85 Zip Code: 33432

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: Douglas L. Roberts Douglas L Roberts 4/30/97
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD ROBERTS, DOUGLAS L. STE 910 TRADE CTR S. 100 W. CYPRESS FT. LAUDERDALE FL	☐ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	☑ Change ☐ Addition ~~P.O. Box 1836~~ ~~Boca Raton FL 33429~~
		☐ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	☐ Change ☐ Addition 1118 Belaire Drive Highland Beach FL 33487
		☐ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP	☐ Change ☐ Addition
		☐ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP	☐ Change ☐ Addition
		☐ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP	☐ Change ☐ Addition
		☐ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP	☐ Change ☐ Addition

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: Douglas L. Roberts 4/30/97 (561) 338-