FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

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

APPROVED AND FILED
95 MAY ... AM 9:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **L90848** **(7)**

1. Corporation Name

C. THOMAS STRICKLAND, P.A.

Principal Place of Business	Mailing Address
1725 BLANDING BLVD JACKSONVILLE FL 32210	1725 BLANDING BLVD JACKSONVILLE FL 32210

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 08/03/1990	3a. Date of Last Report: 05/01/1994
4. FEI Number: 59-3021938	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. ... Florida Statutes. ☐ Yes ☐ No	

2. Principal Place of Business — 21 / Suite, Apt. # etc. 22 / City & State 23 / 24 / 25
2a. Mailing Address — 26 / Suite, Apt. # etc. 27 / City & State 28 / 29 / 30

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
STRICKLAND, C. THOMAS 1725 BLANDING BLVD. JACKSONVILLE FL 32210	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 ... 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 ... Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS	
TITLE	PT
NAME	STRICKLAND, C THOMAS
STREET ADDRESS	1725 BLANDING
CITY-ST-ZIP	JACKSONVILLE FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS — ☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntary, furnished and does not qualify for the exemption stated in Section ... 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: C. Thomas Strickland
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

05/01/95 (904)389-4710

C. THOMAS STRICKLAND, PRESIDENT

0018644 CP