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 APR 24 AM 11:22

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **L95845** **(8)**

1. Corporation Name
D.D.A.P., P.A.

Principal Place of Business	Mailing Address
3421 ST. CONRAD TAMPA FL 33607-2137	3421 ST. CONRAD TAMPA FL 33607-2137

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 08/08/1990
3a. Date of Last Report: 05/10/1994

2. Principal Place of Business	2a. Mailing Address
21 204 S. Ocean Blvd.	26 204 S. Ocean Blvd.
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 City & State: MANALAPAN, FLA.	28 City & State: MANALAPAN, FLA.
24 Zip: 33462 25 Country: U.S.A.	29 Zip: 33462 30 Country: U.S.A.

4. FEI Number: 59-3021472 ☐ 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	10. Name and Address of New Registered Agent
PRICE, DOUGLAS ARMSTRONG 3421 ST. CONRAD TAMPA FL 33627	81 Name: Price, Douglas Armstrong 82 Street Address (P.O. Box Number is Not Acceptable): 204 S. Ocean Blvd. 83 84 City: Manalapan FL 85 Zip Code: 33462

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 A. Price, President DATE: 4/17/95
Signature, typed or printed name of registered agent and title if applicable — NOTE: Registered Agent signature required when reinstating

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	11 TITLE	☒ Change ☐ Addition: D
NAME	PRICE, DOUGLAS A.	12 NAME	Price, Douglas A.
STREET ADDRESS	3421 ST. CONRAD	13 STREET ADDRESS	204 S. Ocean Blvd.
CITY-ST-ZIP	TAMPA FL	14 CITY-ST-ZIP	Manalapan, FLA. 33462
TITLE	P	21 TITLE	☒ Change ☐ Addition: P
NAME	PRICE, DOUGLAS, A	22 NAME	Price, Douglas A.
STREET ADDRESS	3421 ST. CONRAD	23 STREET ADDRESS	204 S. Ocean Blvd.
CITY-ST-ZIP	TAMPA FL	24 CITY-ST-ZIP	Manalapan, FLA. 33462
TITLE		31 TITLE	☐ Change ☐ Addition
NAME		32 NAME	
STREET ADDRESS		33 STREET ADDRESS	
CITY-ST-ZIP		34 CITY-ST-ZIP	
TITLE		41 TITLE	☐ Change ☐ Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY-ST-ZIP		44 CITY-ST-ZIP	
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is accurately transcribed and 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 A. Price, President 4/19/95 (407) 533-0151
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL: OFFICER OR DIRECTOR — Date — Daytime Phone #

0443770 FF