

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

CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # M86359

(0)

1. Corporation Name

ALLEY, MAASS, ROGERS & LINDSAY, P.A.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 FEB -2 PM 2:21

Principal Place of Business
321 ROYAL POINCIANA PLAZA
PALM BCH FL 33480
US

Mailing Address
321 ROYAL POINCIANA PLAZA
PALM BCH FL 33480
US

DO NOT WRITE IN THIS SPACE.

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 06/14/1988		3a. Date of Last Report 02/07/1994	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 65-0086058		Applied For Not Applicable	
22	City & State	27	City & State	5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution ☐		\$5.00 May Be Added to Fees	
24	Country	29	Country	8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No			

9. Name and Address of Current Registered Agent

MAASS, ROBB R
321 ROYAL POINCIANA PLAZA
PALM BEACH FL 33480

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 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.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	☐ Change ☐ Addition
NAME	MAASS, HAROLD G.	1.2 NAME	Remove
STREET ADDRESS	321 ROYAL POINCIANA PLZ	1.3 STREET ADDRESS	
CITY-ST-ZIP	PALM BEACH FL	1.4 CITY-ST-ZIP	
TITLE	D	2.1 TITLE	V/T/D ☒ Change ☐ Addition
NAME	MAASS, ROBB R.	2.2 NAME	
STREET ADDRESS	321 ROYAL POINCIANA PLZ	2.3 STREET ADDRESS	
CITY-ST-ZIP	PALM BEACH FL	2.4 CITY-ST-ZIP	
TITLE	D	3.1 TITLE	☐ Change ☐ Addition
NAME	ATTERBURY, WILLIAM W.	3.2 NAME	Remove
STREET ADDRESS	321 ROYAL POINCIANA PLZ	3.3 STREET ADDRESS	
CITY-ST-ZIP	PALM BEACH FL	3.4 CITY-ST-ZIP	
TITLE	D	4.1 TITLE	P/D ☒ Change ☐ Addition
NAME	LINDSAY, ALAN	4.2 NAME	
STREET ADDRESS	321 ROYAL POINCIANA PLZ	4.3 STREET ADDRESS	
CITY-ST-ZIP	PALM BEACH FL	4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	Rogers, Doyle ☐ Change ☒ Addition
NAME		5.2 NAME	321 Royal Poinciana Plaza
STREET ADDRESS		5.3 STREET ADDRESS	Palm Beach, FL 33480
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	V/S/D ☐ Change ☒ Addition
NAME		6.2 NAME	Capstur, Lenne A.
STREET ADDRESS		6.3 STREET ADDRESS	321 Royal Poinciana Plaza
CITY-ST-ZIP		6.4 CITY-ST-ZIP	Palm Beach, FL 33480

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 110.07(3)(b), 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 recorder 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 of this report, or in an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Alan Lindsay, President

1/30/95

659-1770