

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1998.
AMOUNT DUE ON OR BEFORE 8/4/95: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375)

PROFIT
CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 AUG -9 PM 12:30

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 AUG -0 PM 12:25

DOCUMENT # M96991

(8)

1. Corporation Name

THOMAS A. BARNHART, P.A.

Principal Place of Business

Mailing Address

73 IRONWOOD WAY N
~~5933 GOLDEN EAGLE CIRCLE~~
PALM BCH GRDNS. FL 33418
US

C/O THOMAS A. BARNHART
73 IRONWOOD WAY N
PALM BCH GRDNS. FL 33418
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/01/1988

3a. Date of Last Report

04/28/1994

2. Principal Place of Business

2a. Mailing Address

21 73 IRONWOOD WAY N.

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23 PALM BEACH GARDENS, FL

28

Zip

Country

Zip

Country

24 33418

25

USA

29

30

4. FEI Number

65-0071277

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

7. 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

BARNHART, THOMAS A.
~~5933 GOLDEN EAGLE CIRCLE~~
PALM BCH GRDNS. FL 33418

81 Name

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

73 IRONWOOD WAY N.

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 fee 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
P	BARNHART, THOMAS A.	73 IRONWOOD WAY N.	PALM BEACH GARDENS FL
TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP
TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP
TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP
TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP
TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP
TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY - ST - ZIP
2.1 TITLE <td>2.2 NAME</td> <td>2.3 STREET ADDRESS</td> <td>2.4 CITY - ST - ZIP</td>	2.2 NAME	2.3 STREET ADDRESS	2.4 CITY - ST - ZIP
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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:

Thomas A. Barnhart

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

THOMAS A. BARNHART

7-15-95

407 355 2862

Date

Daytime Phone #

CR2E034 (3/95)