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May 05 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N93000002383 (8)

1. Corporation Name

CPA SOLE PRACTITIONERS, INC.

Principal Place of Business

Mailing Address

31 WALTER MARTIN AVE.
FT. WALTON BCH FL 32548
US

31 WALTER MARTINA AVE.
FT. WALTON BCH FL 32548
US

3. Date Incorporated or Qualified

05/24/1993

4. FEI Number

59-3183991

Applied For

Not Applicable

2. Principal Place of Business

21 31 Walter Martin Rd.

Suite, Apt. #, etc.

22

City & State

23 Ft. Walton Beach FL

Zip

24 32548

Country

25 USA

2a. Mailing Address

26 31 Walter Martin Rd.

Suite, Apt. #, etc.

27

City & State

28 Ft Walton Beach FL

Zip

29 32548

Country

30 USA

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. Is this nonprofit corporation a homeowners association?

☐ Yes ☒ No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.

☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

WELCH, PAUL

31 WALTER MARTIN AVE. 31 Walter Martin Road
FT. WALTON BCH FL 32548

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 617.0502 and 617.1508, 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 617.0503, 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

TITLE ☐ DELETE

TD
SMYTH, SANYA A
83 W. JOHN SIMS PKWY.
VALPARAISO FL

TITLE ☒ DELETE

PD
PATRICK, ROBERT G.
623 HWY. 98 EAST, STE. 7
DESTIN FL

TITLE ☐ DELETE

VD
BORAH, BEVERLY
1234 AIRPORT RD., STE. 104
DESTIN FL

TITLE ☐ DELETE

SD
WELCH, PAUL
31 WALTER MARTIN AVE.
FT. WALTON BCH FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☒ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☒ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☒ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: **Paul Welch**

4/24/98

(850)244-2731

CR2E037 (10/97)