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PROFIT
CORPORATION
ANNUAL REPORT
1996



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

FILED
Jan 22 1996 8:00 am
Secretary of State

DOCUMENT # P92000000059 (5)

1. Corporation Name

ADAMS, QUINTON & FULLER, P.A.

Principal Place of Business

CAMINO REAL CENTRE
7300 WEST CAMINO REAL
BOCA RATON FL 33433
US

Mailing Address

CAMINO REAL CENTRE
7300 WEST CAMINO REAL
BOCA RATON FL 33433
US

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

ADAMS, JAMES D
CAMINO REAL CENTRE, SUITE 224
7300 WEST CAMINO REAL
BOCA RATON FL 33433

81 Name

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

CAMINO REAL CENTRE

83

7300 W CAMINO REAL

84

BOCA RATON

FL

85

Zip Code
33433

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 re-registering.)

DATE

1/16/96

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME
D
QUINTON, EDWARD A
STREET ADDRESS
186 S.W. 13TH ST.
CITY - ST - ZIP
BOCA RATON FL

TITLE ☐ DELETE

NAME
D
FULLER, LOULA M
STREET ADDRESS
402A N OFFICE PLAZA DR
CITY - ST - ZIP
TALLAHASSEE FL

TITLE ☐ DELETE

NAME
PD
ADAMS, JAMES D
STREET ADDRESS
7300 W CAMINO REAL, STE 224
CITY - ST - ZIP
BOCA RATON FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☒ Change ☐ Addition

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP
80 SW 8TH ST, SUITE 2150
MIAMI, FL 33130

☐ Change ☐ Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP
☒ Change ☐ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP
7300 W CAMINO REAL
BOCA RATON, FL 33433

☐ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP
☐ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP
☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP
☐ Change ☐ Addition

1/16/96

407-393-9808

CR2E034 (12/95)