

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Jan 30 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P92000000887 (9)

1. Corporation Name

FORLIZZO & NEAL, P.A.

Principal Place of Business

Mailing Address

13577 FEATHER SOUND DR
SUITE 300
CLEARWATER FL 34622-5547
US

13577 FEATHER SOUND DR
SUITE 300
CLEARWATER FL 34622-5547
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/01/1992

4. FEI Number

59-3147557

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 owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

25 Country

28 Zip

30 Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

JACOBS, RICHARD O
1355 PINELLAS BAYWAY
TIERRA VERDE FL 33715

81 Name

Robert A. Forlizzo

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

13577 Feather Sound Drive, Suite 300

83

84 City

Clearwater

FL

85 Zip Code

33762

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)

1/11/98

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD
NAME JACOBS, RICHARD O
STREET ADDRESS 1355 PINELLAS BAYWAY S
CITY-ST-ZIP TIRREA VERDE FL ☒ DELETE

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE VPD
NAME FORLIZZO, ROBERT A
STREET ADDRESS 13616 LAKE PT DR S
CITY-ST-ZIP CLEARWATER FL ☐ DELETE

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP ☒ Change ☐ Addition
President, Treasurer, Director
Forlizzo, Robert A.
13577 Feather Sound Drive, Suite 300
Clearwater, FL 33762

TITLE STD
NAME NEAL, A.R.
STREET ADDRESS 2873 LACONCHA DRIVE
CITY-ST-ZIP CLEARWATER FL ☐ DELETE

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP ☒ Change ☐ Addition
Vice-Pres., Secretary, Director
Neal, A. R.
13577 Feather Sound Drive, Suite 300
Clearwater, FL 33762

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

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

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

SIGNATURE

1/11/98 13577-1727

CR2E034 (10/97)