

**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375)**

PROFIT CORPORATION ANNUAL REPORT 1995



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

APPROVED AND FILED

95 JUL 11 PM 3:01

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

900001536089
-07/12/95--01079--002
****225.00 ****225.00

DO NOT WRITE IN THIS SPACE.

DOCUMENT # P92000003662 (3)

1. Corporation Name

CONSTANCE J. MCCAUGHEY, P.A.

Principal Place of Business

2555 ENTERPRISE ROAD
SUITE 9-1
CLEARWATER FL 34623
US

Mailing Address

2555 ENTERPRISE ROAD
SUITE 9-1
CLEARWATER FL 34623
US
PO Box 1978
DUNEDIN,
FL 34697-1978

3. Date Incorporated or Qualified
11/12/1992

3a. Date of Last Report
06/21/1994

4. FEI Number
59-3177912

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 has liability for intangible tax under s. 199.032, Florida Statutes Yes No

2. Principal Place of Business

21 PO Box 1978

2a. Mailing Address

26 PO Box 1978

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

27 City & State

24 Zip

Country

28 Zip

Country

25

Country

29 34697-1978

30

DUNEDIN

9. Name and Address of Current Registered Agent

MCCAUGHEY, CONSTANCE J.
2555 ENTERPRISE ROAD, SUITE 9-1
STE 222
CLEARWATER FL 34623

10. Name and Address of New Registered Agent

81 Name

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

220 LYNDHURST ST.

83

84 City DUNEDIN

FL

85 Zip Code

34698-1978

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

TITLE	DP
NAME	MCCAUGHEY, CONSTANCE J
STREET ADDRESS	2555 ENTERPRISE ROAD, SUITE 9-1
CITY - ST - ZIP	CLEARWATER 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	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	P.O. Box 1978 NW
1.4 CITY - ST - ZIP	DUNEDIN, FL 34697-1978
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 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 110.07(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:

Constance J. McCaughey

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Constance J. McCaughey, Esq.

6/29/95

Date

797-8967

Telephone #

(813)

CR2E034 (3/95)