FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



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

1996

DOCUMENT # 1. Corporation Name

P92000004330 (6)

DONALDSON & ASSOCIATES, INC.

Principal Place of Business Mailing Address									
	Mailing Address	*			A TENNES AND MINE SIERS OF A SELL	i maiti a Bitt dâli	/ 8 /888 1810	ON IIIIII DEII FADI	
11305 LOCH LOMOND RIVERVIEW FL 33569		11305 LOCH LOMOND RIVERVIEW FL 33569							
						3. Date Incorporated or Qualified 11/09/1992	3a. Date o	of Last R /31/19:	
· ·	flace of Business	2a. Mailing Address				4. FEI Number			Applied For
21		26				59-3148006)	Not Applicable
Suite, Apt.		Suite, Apt #, etc.				5. Certificate of Status Desired		\$8.75	Additional Required
City & Stat		City & State				Election Campaign Financing Trust Fund Contribution			O May Be d to Fees
Zip	Country	Zip	 -	untry		8. This corporation has liability for i	intangible tax		
24	25	[29]	30			Florida Statutes Yes			, 50.1001.
	9. Name and Address of Curre	ent Registered Agent		<u> </u>		10. Name and Address of New R	egistered A	gent	
				81	Nanie				
	DSON, RICHARD			82	Street Add	ress (P.O. Box Number is Not Acceptab	lo)		
11305 LOCH LOMOND					ļ		,		
HIVERV	IEW FL 33569			83					
				84	City				
44-5					,		FL		Code
familiar wi SIGNATURE	red agent, or both, in the State of Flor th, and accept the obligations of, Sec Signature hard or proted name of regional agen	tion 607.0505, Florida Statute	s.	COLD	0 80011 \$ 003	ration submits this statement for the purporal of directors. Thereby accept the appointmentation	ointinent as re	ging its registered	egistered office agent. I am
12.		ND DIRECTORS	13.		Serame Celones		DATE CEDS AND D	IDECTO.	DO IN 10
TITLE	D	☐ DELETE				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
NAME	DOMALDOOM DICHARD			AME	ĺ	Change [] Adulti			E Addition
STREET ADDRESS	11305 LOCH LOMOND				ADORESS				İ
CITY-ST-ZIP	RIVERVIEW FL 33569			ITY - S!					
TITLE		DELETE	2 1 1					Change	- Addition
NAME			2 2 N/				LJ	onal-ge	Addition
STREET ADDRESS			1	-	ADDRESS				
CITY - ST - ZIP			2 4 CI						
TITLE		DELETE 3.1			-211	☐ Change			- Addition
NAME		_	3 2 NA					onanys	☐ Addition
STREET ADDRESS					ADDRESS				İ
CITY - ST - ZIF			3 4 01						
TITLE		☐ DELETE	4. 1 Ti					Change	Add-tion
NAME	Ç	_	4.2 NA				LJ '	Juanyo	L WOUTHING
STREET ADDRESS					ADDRESS				
CITY - ST - ZIP				niti s Ev et	1				İ

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 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.

4 4 C!TY - \$1 - ZIP

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY - ST - ZIP

5 1 Tiflé

5.2 NAME

6 1 TITLE

6.2 NAME

TIFLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY - ST-ZIP

CITY-ST-ZIP

SIGNATURE: Ment of Signature and Typed on Printed Name of Signature of Director

DELETE

DELETE

813-671-3057

Change

☐ Change

☐ Addition

Addition