

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P92000012003 (9)

1. Corporation Name

MCCARTHY, SUMMERS, BOBKO & MCKEY, P.A.

McCarthy, Summers, Bobko, McKey, Wood & Sawyer, P.A.

Principal Place of Business

2081 E OCEAN BOULEVARD
SUITE 2-A
STUART FL 34996

Mailing Address

2081 E OCEAN BOULEVARD
SUITE 2-A
STUART FL 34996

3. Date Incorporated or Qualified
12/15/1992

3a. Date of Last Report
04/17/1995

2. Principal Place of Business

2a. Mailing Address

21 2081 E. Ocean Blvd.

26 Suite, Apt. #, etc.

4. FEI Number

65-0374285

Applied For
Not Applicable

22 Suite, Apt. #, etc.

27 Suite, Apt. #, etc.

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

23 Second Floor

28 City & State

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

24 City & State
Stuart, FL

29 City & State

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

25 Zip
34996

26 Country
USA

27 Zip

28 Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SUMMERS, ROBERT P.
2081 E OCEAN BOULEVARD
SUITE 2-A
STUART FL 34996

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 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 agree to 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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

1.1 TITLE President ☐ Change ☐ Addition

NAME MCCARTHY, TERENCE P.
STREET ADDRESS 2081 E. OCEAN BLVD. 2-A
CITY-ST-ZIP STUART FL 34996

12 NAME
13 STREET ADDRESS
14 CITY-ST-ZIP

TITLE ☐ DELETE

2.1 TITLE Vice President ☒ Change ☐ Addition

NAME SUMMERS, ROBERT P.
STREET ADDRESS 2081 E. OCEAN BLVD. 2-A
CITY-ST-ZIP STUART FL 34996

22 NAME
23 STREET ADDRESS
24 CITY-ST-ZIP

TITLE ☐ DELETE

3.1 TITLE ☐ Change ☐ Addition

NAME BOBKO, NOEL
STREET ADDRESS 2081 E OCEAN BOULEVARD
CITY-ST-ZIP STUART FL 34996

32 NAME
33 STREET ADDRESS
34 CITY-ST-ZIP

TITLE ☐ DELETE

4.1 TITLE ☐ Change ☐ Addition

NAME MCKEY, JOHN
STREET ADDRESS 2081 E OCEAN BOULEVARD
CITY-ST-ZIP STUART FL 34996

42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP

TITLE ☐ DELETE

5.1 TITLE ☐ Change ☐ Addition

NAME Steven Wood
STREET ADDRESS 2081 E. Ocean Boulevard
CITY-ST-ZIP Stuart, FL 34996

52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP

TITLE ☐ DELETE

6.1 TITLE ☐ Change ☐ Addition

NAME Thomas Sawyer
STREET ADDRESS 2081 E. Ocean Boulevard
CITY-ST-ZIP Stuart, FL 34996

62 NAME
63 STREET ADDRESS
64 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is truthfully 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 officer or director empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 of this report.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (12/95)