

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

CORPORATION
ANNUAL REPORT
1995



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

FILED

95 FEB 17 PM 3:11

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P93000006267 (7)

1. Corporation Name

SYPRETT, MESHAD, RESNICK, LIEB, DUMBAUGH & JONES
, P.A.

Principal Place of Business

1900 RINGLING BLVD.
SARASOTA FL 34236

Mailing Address

1900 RINGLING BLVD.
SARASOTA FL 34236

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

01/20/1993

3a. Date of Last Report

02/02/1994

4. FEI Number

65-0381763

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

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

10. Name and Address of New Registered Agent

DUMBAUGH, JOHN D
1900 RINGLING BLVD
SARASOTA FL 34236

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 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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	D
NAME	SYPRETT, JIM D
STREET ADDRESS	1900 RINGLING BLVD
CITY- ST- ZIP	SARASOTA FL
TITLE	DVST
NAME	MESHAD, JOHN W
STREET ADDRESS	1900 RINGLING BLVD
CITY- ST- ZIP	SARASOTA FL
TITLE	DAVT
NAME	RESNICK, MICHAEL L
STREET ADDRESS	1900 RINGLING BLVD
CITY- ST- ZIP	SARASOTA FL
TITLE	DAVS
NAME	LIEB, M J JR
STREET ADDRESS	1900 RINGLING BLVD
CITY- ST- ZIP	SARASOTA FL
TITLE	DAVP
NAME	DUMBAUGH, JOHN D
STREET ADDRESS	1900 RINGLING BLVD
CITY- ST- ZIP	SARASOTA FL
TITLE	DAVP
NAME	JONES, TERESA D
STREET ADDRESS	1900 RINGLING BLVD
CITY- ST- ZIP	SARASOTA FL

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY- ST- ZIP	
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY- ST- ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY- ST- ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY- ST- ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY- ST- ZIP	
6.1 TITLE	☐ Change ☐ 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 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 007, Florida Statutes; and that my name appears in Block 12 or Block 13 (if changed), or as an attachment with an address.

SIGNATURE:

SIGNATURE (TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR)

President

1/18/95

(813) 365-7171

Date

Daytime Phone #