

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # P93000011295 (1)

1. Corporation Name

MUELLER AND COMPANY, P.A.



Principal Place of Business

Mailing Address

6453 S ORANGE AVE  
STE #1  
ORLANDO FL 32809  
US

6453 S ORANGE AVE  
STE #1  
ORLANDO FL 32809  
US

3. Date Incorporated or Qualified  
02/08/1993

3a. Date of Last Report  
07/25/1995

2. Principal Place of Business

2a. Mailing Address

21 6453 South Orange Avenue

26 6453 South Orange Avenue

22 Suite #4

27 Suite #4

23 Orlando, FL

28 Orlando, FL

24 32809

25 USA

29 32809

30 USA

4. FEI Number  
59-3165250

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BELLEVILLE, WALTER J  
815 ORIENTA AVE  
SUITE 6  
ALTAMONTE SPRINGS FL 32701

81 Name Kenneth J. Mueller

82 Street Address (P.O. Box Number is Not Acceptable)  
6453 South Orange Ave., Suite #4

83

84 City Orlando

FL

85 Zip Code 32809

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

Kenneth J. Mueller

3/7/96

12. OFFICERS AND DIRECTORS

1.1 TITLE ☐ DELETE

NAME  
MUELLER, KENNETH J  
STREET ADDRESS  
6453 S ORANGE AVENUE, SUITE 1  
CITY-ST-ZIP  
ORLANDO FL

1.2 TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

1.3 TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

1.4 TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

1.5 TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

1.6 TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME  
Kenneth J. Mueller  
1.3 STREET ADDRESS  
6453 South Orange Avenue, Suite #4  
1.4 CITY-ST-ZIP  
Orlando, FL 32809

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

SIGNATURE:

Kenneth J. Mueller

3/7/96

(407) 850-9000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #

CR2E034 (12/95)