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May 01 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P93000018057 (8)

1. Corporation Name

T PATTON YOUNGBLOOD, JR., P.A.

Principal Place of Business

~~4329 NO. ARMENIA AVE.~~
~~TAMPA FL 33607~~
US

Mailing Address

~~4329 NO. ARMENIA AVE.~~
~~TAMPA FL 33607-0427~~
US

3. Date Incorporated or Qualified
03/10/1993

3a. Date of Last Report
05/01/1996

2. Principal Place of Business

21 304 SOUTH PLANT AVE.

Suite, Apt. #, etc.

22

City & State

23 TAMPA, FL

Zip

24 33606

Country

2a. Mailing Address

26 SAME

Suite, Apt. #, etc.

27

City & State

28

Zip

29

Country

30

4. FEI Number

65-0388725

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

YOUNGBLOOD, T P JR

~~4329 NO. ARMENIA AVE.~~

~~TAMPA FL 33607~~

81 Name

SAME

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

304 SOUTH PLANT AVE.

83

84 City

TAMPA

FL

85 Zip Code

33606

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]

4/23/97

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

DVPT

☐ DELETE

NAME

YOUNGBLOOD, T P JR

STREET ADDRESS

~~4329 NO. ARMENIA AVE.~~

CITY - ST - ZIP

~~TAMPA FL~~

1.1 TITLE

SAME

☒ Change

☐ Addition

1.2 NAME

SAME

1.3 STREET ADDRESS

304 SOUTH PLANT AVE.

1.4 CITY - ST - ZIP

TAMPA, FL 33606

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 does not qualify for the exemption stated in Section 119.07(3)(i), 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:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(T. Patton Youngblood, Jr., Pres.)

4/23/97

(After 4/30/97)

(613) 250-0605

Date

Daytime Phone #

CR2E034 (9/96)