

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 # P93000022752 (8)

1. Corporation Name

JONATHAN C. KOCH, P.A.



Principal Place of Business

100 S ASHLEY DR
~~SUITE 2100~~
TAMPA FL 33602

Mailing Address

P.O. BOX 2311
TAMPA FL 33601
US

2. Principal Place of Business

21 Suite, Apt. #, etc.
22 SUITE 1290
23 City & State

24 Zip 25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.
27 City & State

28 Zip 29 Country 30

3. Date Incorporated or Qualified
03/17/1993

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

4. FEI Number

59-3171231

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

KOCH, JONATHAN C
100 S ASHLEY DR
~~SUITE 2100~~
TAMPA FL 33602

10. Name and Address of New Registered Agent

81 Name

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

83 SUITE 1290

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 with the state printed

Date Registered Agent Signature Required with "Registering"

DATE

12. OFFICERS AND DIRECTORS

TITLE D
NAME KOCH, JONATHAN C
STREET ADDRESS 100 S ASHLEY DR SUITE 2100
CITY-STATE-ZIP TAMPA FL 33602

TITLE P
NAME KOCH, JONATHAN C.
STREET ADDRESS 100 S. ASHLEY DRIVE, SUITE 2100
CITY-STATE-ZIP TAMPA FL

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

13.

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-STATE-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-STATE-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-STATE-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-STATE-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-STATE-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-STATE-ZIP

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☒ Change ☐ Add on

100 SOUTH ASHLEY DRIVE SUITE 1290

100 SOUTH ASHLEY DRIVE SUITE 1290

400001829404
-05/20/96--01047--047

***200.00

SIGNATURE:

Jonathan C. Koch
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
JONATHAN C. KOCH

4/30/96

8132739311
Daytime Phone #

CR2E034 (12/95)

A 5/1/96