FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # P93000029637 (4)

JAMES H. DAMBECK & ASSOCIATES, INC.

Principal Place of Business			М	Mailing Address						i 60 146 jihih i	ATEN BINDA INII	1001 1001
4735 - 4TH AVENUE NORTH ST. PETERSBURG FL 33713				4735 - 4TH AVENUE NORTH ST. PETERSBURG FL 33713-7208								
									 Date Incorporated or Qualified 04/22/1993 		te of Last R 25/1996	eport
2. Principal Place of Business				2a, Mailing Address					4. FEI Number		Ap	plied For
21				26					59-3182165			t Applicable
Suite, Apt #, etc.				Suite, Apt. #, etc.					5. Certificate of Status Desired		\$8.75 / Fee Re	
City & State				City & State					6. Election Campaign Financing	_	\$ 5.00	
23				7.0			in the control of the		Trust Fund Contribution		Added	
Zip	Country			Zip Cou 30			Country		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes Yes			
24	9. Name and Address of Current Registere								10. Name and Address of New Registered Agent			
BYRNE, JAMES A							1	Name				
540 - 4TH STREET NORTH						82	Ļ	Street Addres	ss (P.O. Box Number is Not Acceptal	olo)		
ST. PETERSBURG FL 33701						102	ľ	Street Addres	ss (F.O. box indriber is not noteptal	ле)		
OTT ELEMODOTION & GOVER						83						
							(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 profiles name of registered ago 12. OFFICERS AN								signature required	when reinstating)	DATE	DIDECTOR	O IN 40
12.	Р	OFFICERS	AND DIREC	DEI	ETE	13.		7	ADDITIONS/CHANGES TO OFFI	JEHS AND	☐ Change	Addition
NAME	DAMBECK,	JAMES H		L., DC		1.2 NAME					□ Grange	
STREET ADDRESS		AVENUE NORTH	1	•			1.3 STREET ADDRESS					
***************************************	CITY-ST-ZIP ST. PETERSBURG FL				1.4 CI							
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NAME						2.2 NAME		1			-	
STREET ADDRESS	-					2.3 STREET	AD	ODRESS				
CiTY - ST - ZIP						2. 4 CITY -	ST	ZIP				
TITLE				DE	ETE	3.1 TITLE	-				Change	Addition
NAME						3.2 NAME						
STREET ADDRESS						3.3 STREET	AD	DRESS				
CITY-ST-ZIP				· · · · · · · · · · · · · · · · · · ·		3.4. CITY - S	\$1-	ZIP				
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NAMÉ						4. 2 NAME						
STREET ADDRESS						4.3 STREET						
CITY-SI-ZIP	<u> </u>		·	Tine	ETT.	4.4 CITY - S	1-1	ZIP		· · · · · · · · · · · · · · · · · · ·	Character	Addison
TITLE				☐ DE	LEIE	5.1 TITLE		-			Change	Addition
NAME						5.2 NAME						ļ
STREET ADDRESS						5.3 STREET	AD	idress				

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.

54 CITY-ST-ZIP

6.3 STREET ADORESS 6.4 CITY-ST-ZIP

61 TITLE

6.2 NAME

SIGNATURE

CITY - ST - ZIP

TITLE

NAME STREET ADDRESS

Tames H. Damber Con Control of Printed Name of Signing Offices on Director

DELETE

Se 2-7-97 813-321-904

___ Addition

FILED

Feb 11 1997 8:00am

Secretary of State