

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

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Mar 03 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P93000030107 (5)**

1. Corporation Name

DARRYL J. TOMPKINS, P.A.



Principal Place of Business

**2400 EAST COMMERCIAL BLVD.
SUITE 820
FT. LAUDERDALE FL 33308**

Mailing Address

**2400 EAST COMMERCIAL BLVD.
SUITE 820
FT. LAUDERDALE FL 33308**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 102 S. Main ST		26 P.O. Box 519		04/20/1993	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number	
22		27		65-0407995	
City & State		City & State		Applied For	
23 Alachua, Florida		28 Alachua, Florida		Not Applicable	
Zip		Zip		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
24 32615		29 32616		6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
25 USA		30 USA		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No	

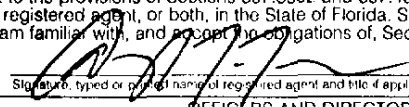
9. Name and Address of Current Registered Agent

**TOMPKINS, DARRYL J
2400 E. COMMERCIAL BLVD.
SUITE 820
FT. LAUDERDALE FL 33308**

10. Name and Address of New Registered Agent

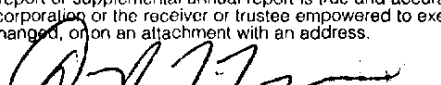
81 Name	Tompkins, Darryl J.	
82 Street Address (P.O. Box Number is Not Acceptable)	102 S. Main ST	
83	P.O. Box 519	
84 City	Alachua	85 Zip Code 32615

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  **DARRYL J. TOMPKINS** DATE **2/27/98**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP ☐ DELETE	1.1 TITLE	DP ☒ Change ☐ Addition
NAME	TOMPKINS, DARRYL J	1.2 NAME	Tompkins, Darryl J.
STREET ADDRESS	2400 E. COMMERCIAL BLVD. #820	1.3 STREET ADDRESS	102 S. Main ST
CITY-ST-ZIP	FT. LAUDERDALE FL	1.4 CITY-ST-ZIP	Alachua, Florida 32615
TITLE	☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I 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: 

2/27/98 (904) 418-1000

CR2E034 (10/97)