SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 8, 1995.
AMOUNT DUE ON OR BEFORE 5/5/95: $235 (IF DISSOLVED, REINSTATEMENT AMOUNT DUE TO REINSTATE: $270)

PROFIT CORPORATION ANNUAL REPORT

1995

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JUN 30 AM 9:49

DOCUMENT # **P93000051224 (2)**

1. Corporation Name

GERALD L. PICKETT, P.A.

Principal Place of Business	Mailing Address
103 COURTHOUSE SQUARE INVERNESS FL 34452 US	1904 W MAIN ST INVERNESS FL 34452 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **07/16/1993**
3a. Date of Last Report: **03/17/1994**

2. Principal Place of Business
21 **211 S. Seminole Avenue**
22 Suite, Apt. #, etc
23 City & State: **Inverness, FL**
24 Zip: **34452** 25 County: **US**

2a. Mailing Address
26 **211 S. Seminole Avenue**
27 Suite, Apt. #, etc
28 City & State: **Inverness, FL**
29 Zip: **34452** 30 County: **US**

4. FEI Number: **59-3193888** ☐ 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

7. This corporation has liability for intangible tax under s. 199.032 Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

PICKETT, GERALD L
1904 W MAIN ST
INVERNESS FL 34452

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable): **211 S. Seminole Avenue**
83
84 City: **Inverness** **FL** 85 Zip Code: **34452**

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: Gerald L Pickett Gerald L. Pickett 6/27/95
(Signature, typed or printed name of registered agent, and the date of this application) (If other than Registered Agent, signature required when changing)

12. OFFICERS AND DIRECTORS		13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	11 TITLE	XX Change	☐ Addition
NAME	PICKETT, GERALD L	12 NAME		
STREET ADDRESS	103 COURTHOUSE SQUARE	13 STREET ADDRESS	211 S. Seminole Avenue	
CITY ST ZIP	INVERNESS FL 34450	14 CITY ST ZIP	Inverness,FL 34452	
TITLE		21 TITLE	☐ Change	☐ Addition
NAME		22 NAME		
STREET ADDRESS		23 STREET ADDRESS		
CITY ST ZIP		24 CITY ST ZIP		
TITLE		31 TITLE	☐ Change	☐ Addition
NAME		32 NAME		
STREET ADDRESS		33 STREET ADDRESS		
CITY ST ZIP		34 CITY ST ZIP		
TITLE		41 TITLE	☐ Change	☐ Addition
NAME		42 NAME		
STREET ADDRESS		43 STREET ADDRESS		
CITY ST ZIP		44 CITY ST ZIP		
TITLE		51 TITLE	☐ Change	☐ Addition
NAME		52 NAME		
STREET ADDRESS		53 STREET ADDRESS		
CITY ST ZIP		54 CITY ST ZIP		
TITLE		61 TITLE	☐ Change	☐ Addition
NAME		62 NAME		
STREET ADDRESS		63 STREET ADDRESS		
CITY ST ZIP		64 CITY ST ZIP		

CR2E034 (3/95)

14. I 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)(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: Gerald L Pickett Gerald L. Pickett 6/27/95 (904) 726-1630
SIGNATURE AND TYPED OR PRINTED NAME OF MOVING OFFICER OR DIRECTOR (Date) (Daytime Phone)

0100000 PP