

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

ANNUAL REPORT
1995



NOTES: This form is to be filed with the annual report of the corporation. It is not to be filed with the annual report of the corporation. It is not to be filed with the annual report of the corporation.

DOCUMENT # P93000053976 (5)

1. Name of Corporation

CURTIS STOKES & ASSOCIATES, INC.

APPROVED
1/13/95

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2. Principal Place of Business

% ACCOUNTING & BUSINESS CONSULTANTS INC
790 E BROWARD BLVD SUITE 302
FT LAUDERDALE FL 33301

Mailing Address

1323 SE 17TH ST
#168
FT LAUDERDALE FL 33316
US

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified	3a. Date of Last Report
08/02/1993	03/01/1994
4. FEI Number	Applied For Not Applicable
65-0427608	
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

2. Principal Place of Business	2a. Mailing Address
21. State, Apt. #, etc.	26. Suite, Apt. #, etc.
22. City & State	27. City & State
23. Country	28. Zip
24. Country	29. Zip

9. Name and Address of Current Registered Agent

STOKES, PAUL C III
1323 SE 17TH ST #168
FT LAUDERDALE FL 33316

10. Name and Address of New Registered Agent

81. Name

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

83. City

84. State

85. Zip Code

11. I, the undersigned, being duly sworn, depose and say that the above-named corporation submits this statement for the purpose of changing its registered office, 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

Signature of Registered Agent: _____ DATE: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1. NAME	2. TITLE	1. NAME	2. TITLE
3. STREET ADDRESS	4. CITY-ST-ZIP	1. NAME	2. TITLE
5. STREET ADDRESS	6. CITY-ST-ZIP	1. NAME	2. TITLE
7. STREET ADDRESS	8. CITY-ST-ZIP	1. NAME	2. TITLE
9. STREET ADDRESS	10. CITY-ST-ZIP	1. NAME	2. TITLE
11. STREET ADDRESS	12. CITY-ST-ZIP	1. NAME	2. TITLE
13. STREET ADDRESS	14. CITY-ST-ZIP	1. NAME	2. TITLE
15. STREET ADDRESS	16. CITY-ST-ZIP	1. NAME	2. TITLE
17. STREET ADDRESS	18. CITY-ST-ZIP	1. NAME	2. TITLE
19. STREET ADDRESS	20. CITY-ST-ZIP	1. NAME	2. TITLE
21. STREET ADDRESS	22. CITY-ST-ZIP	1. NAME	2. TITLE
23. STREET ADDRESS	24. CITY-ST-ZIP	1. NAME	2. TITLE
25. STREET ADDRESS	26. CITY-ST-ZIP	1. NAME	2. TITLE
27. STREET ADDRESS	28. CITY-ST-ZIP	1. NAME	2. TITLE
29. STREET ADDRESS	30. CITY-ST-ZIP	1. NAME	2. TITLE
31. STREET ADDRESS	32. CITY-ST-ZIP	1. NAME	2. TITLE
33. STREET ADDRESS	34. CITY-ST-ZIP	1. NAME	2. TITLE
35. STREET ADDRESS	36. CITY-ST-ZIP	1. NAME	2. TITLE
37. STREET ADDRESS	38. CITY-ST-ZIP	1. NAME	2. TITLE
39. STREET ADDRESS	40. CITY-ST-ZIP	1. NAME	2. TITLE
41. STREET ADDRESS	42. CITY-ST-ZIP	1. NAME	2. TITLE
43. STREET ADDRESS	44. CITY-ST-ZIP	1. NAME	2. TITLE
45. STREET ADDRESS	46. CITY-ST-ZIP	1. NAME	2. TITLE
47. STREET ADDRESS	48. CITY-ST-ZIP	1. NAME	2. TITLE
49. STREET ADDRESS	50. CITY-ST-ZIP	1. NAME	2. TITLE
51. STREET ADDRESS	52. CITY-ST-ZIP	1. NAME	2. TITLE
53. STREET ADDRESS	54. CITY-ST-ZIP	1. NAME	2. TITLE
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57. STREET ADDRESS	58. CITY-ST-ZIP	1. NAME	2. TITLE
59. STREET ADDRESS	60. CITY-ST-ZIP	1. NAME	2. TITLE
61. STREET ADDRESS	62. CITY-ST-ZIP	1. NAME	2. TITLE
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67. STREET ADDRESS	68. CITY-ST-ZIP	1. NAME	2. TITLE
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73. STREET ADDRESS	74. CITY-ST-ZIP	1. NAME	2. TITLE
75. STREET ADDRESS	76. CITY-ST-ZIP	1. NAME	2. TITLE
77. STREET ADDRESS	78. CITY-ST-ZIP	1. NAME	2. TITLE
79. STREET ADDRESS	80. CITY-ST-ZIP	1. NAME	2. TITLE
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87. STREET ADDRESS	88. CITY-ST-ZIP	1. NAME	2. TITLE
89. STREET ADDRESS	90. CITY-ST-ZIP	1. NAME	2. TITLE
91. STREET ADDRESS	92. CITY-ST-ZIP	1. NAME	2. TITLE
93. STREET ADDRESS	94. CITY-ST-ZIP	1. NAME	2. TITLE
95. STREET ADDRESS	96. CITY-ST-ZIP	1. NAME	2. TITLE
97. STREET ADDRESS	98. CITY-ST-ZIP	1. NAME	2. TITLE
99. STREET ADDRESS	100. CITY-ST-ZIP	1. NAME	2. TITLE

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(9)(b), Florida Statutes. I further certify that the information submitted 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. 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 on Block 12 or Block 13 of this report, or on an attached statement with an address.

SIGNATURE: Paul C. Stokes III / Paul C. Stokes III 1/13/95
SIGNATURE AND TYPED OR PRINTED NAME OF BOARD OFFICER OR DIRECTOR