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Mar 20 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997	 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P93000062768 (5)

1. Corporation Name

SYMANSKI & MCKNIGHT, P.A., C.P.A.'S



Principal Place of Business 1301 SEMINOLE BOULEVARD SUITE 115 LARGO FL 34640	Mailing Address 1301 SEMINOLE BOULEVARD SUITE 115 LARGO FL 33770-8124
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3. Date Incorporated or Qualified 09/02/1993	3a. Date of Last Report 02/15/1996
4. FEI Number 59-3201239	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	

2. Principal Place of Business 21. Suite, Apt. #, etc. 22. City & State 23. Zip 24. Country	2a. Mailing Address 26. Suite, Apt. #, etc. 27. City & State 28. Zip 29. Country
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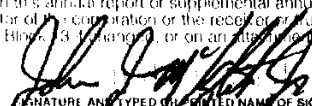
9. Name and Address of Current Registered Agent SYMANSKI, ROBERT P 1301 SEMINOLE BOULEVARD SUITE 115 LARGO FL 34640	10. Name and Address of New Registered Agent 81. Name 82. Street Address (P.O. Box Number is Not Acceptable) 83. 84. City 85. Zip Code FL
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11. 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 _____ DATE _____
Sign in the space the printed name of registered agent and, if applicable, (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1.1 TITLE D NAME MCKNIGHT, JOHN STREET ADDRESS 568 CORVETTE DRIVE CITY-ST-ZIP LARGO FL 34641	1.1 TITLE ☐ Change ☐ Addition 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP
2.1 TITLE D NAME SYMANSKI, ROBERT P STREET ADDRESS 3137 CARLOS DRIVE CITY-ST-ZIP DUNEDIN FL 34698	2.1 TITLE ☐ Change ☐ Addition 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP
3.1 TITLE ☐ DELETE	3.1 TITLE ☐ Change ☐ Addition
3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP
4.1 TITLE ☐ DELETE	4.1 TITLE ☐ Change ☐ Addition
4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP
5.1 TITLE ☐ DELETE	5.1 TITLE ☐ Change ☐ Addition
5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP
6.1 TITLE ☐ DELETE	6.1 TITLE ☐ Change ☐ Addition
6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

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 included 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 registered agent or a duly 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 addition with an address.

SIGNATURE:  JOHN J. MCKNIGHT JR 3/17/97 813-584-8186
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Day, mo, Yr

CR2E034 (9/96)