

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

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Mar 11 1997 8:00am
Secretary of State

PROFIT CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P93000070703
1. Corporation Name
MARY ALICE GWYNN PA.

Principal Place of Business Mailing Address
811 George Bush BLVD
DeLray Beach, FL 33483

| | |
|--|---------------------------------|
| 3. Date Incorporated or Qualified 9/14/93 | 3a. Date of Last Report 3/96 |
| 4. FEI Number 65-0448918 | Applied For Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |
| 6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> | \$5.00 May Be Added to Fees |
| 7. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | |

| | |
|---|--|
| 2. Principal Place of Business 21 811 George Bush BLVD State: Apt. #, etc. - 22 City & State DeLray Beach, FL. 23 Zip 33483 | 2a. Mailing Address 26 811 George Bush BLVD Suite, Apt. #, etc. - 27 City & State DeLray Beach, FL. 28 Zip 33483 |
| 25 Palm Beach | 30 Palm Beach |

9. Name and Address of Current Registered Agent
MARY ALICE GWYNN
811 George Bush BLVD
DeLray Beach, FL 33483

| | |
|---|-------------|
| 81 Name | 85 Zip Code |
| 82 Street Address (P.O. Box Number is Not Acceptable) | FL |
| 83 | |
| 84 City | |

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: *Mary A. Gwynn* DATE: 2/22/97
(NOTE: Registered Agent signature required when reinstating)

| 12. OFFICERS AND DIRECTORS | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
|---|---------------------------------|---|---|
| 12.1 TITLE President | <input type="checkbox"/> DELETE | 13.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 12.2 NAME MARY ALICE GWYNN | | 13.2 NAME | |
| 12.3 STREET ADDRESS 811 GEORGE BUSH BLVD | | 13.3 STREET ADDRESS | |
| 12.4 CITY-STATE-ZIP DeLray Beach, FL 33483 | | 13.4 CITY-STATE-ZIP | |
| 12.5 TITLE | <input type="checkbox"/> DELETE | 13.5 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 12.6 NAME | | 13.6 NAME | |
| 12.7 STREET ADDRESS | | 13.7 STREET ADDRESS | |
| 12.8 CITY-STATE-ZIP | | 13.8 CITY-STATE-ZIP | |
| 12.9 TITLE | <input type="checkbox"/> DELETE | 13.9 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 12.10 NAME | | 13.10 NAME | |
| 12.11 STREET ADDRESS | | 13.11 STREET ADDRESS | |
| 12.12 CITY-STATE-ZIP | | 13.12 CITY-STATE-ZIP | |
| 12.13 TITLE | <input type="checkbox"/> DELETE | 13.13 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 12.14 NAME | | 13.14 NAME | |
| 12.15 STREET ADDRESS | | 13.15 STREET ADDRESS | |
| 12.16 CITY-STATE-ZIP | | 13.16 CITY-STATE-ZIP | |

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14. I declare under penalty 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 contained 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: *Mary A. Gwynn* Date: 3-11-97
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #

CR2E034 (9/96)