FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION
ANNUAL REPORT
1995

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

APPROVED
FILED

TALLAHASSEE, FLORIDA

DOCUMENT # **P93000086017 (9)**

1. Corporate Name
PETER C. PAPPAS, P.A.

Principal Place of Business
225 E. ROBINSON STREET
SUITE 540
ORLANDO FL 32801

Mailing Address
225 E. ROBINSON STREET
SUITE 540
ORLANDO FL 32801

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **12/15/1993**
3a. Date of Last Report: **04/29/1994**

2. Principal Place of Business
21
Suite, Apt. #, etc.
22
City & State
23
Zip 24 County 25

2a. Mailing Address
26
Suite, Apt. #, etc.
27
City & State
28
Zip 29 County 30

4. FEI Number: **59-3214435** — 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. The corporation has taken the election to be taxable under S. 1911.0[illegible] Florida Statutes. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent
PAPPAS, PETER C
225 E. ROBINSON STREET
SUITE 540
ORLANDO FL 32801

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Section [illegible] and [illegible] Florida Statutes, the above named corporation submits the 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 [illegible] Florida Statutes.

SIGNATURE: Peter C. Pappas, PRESIDENT PETER C. PAPPAS 4/27/95
(Signature of Current Registered Agent or Incoming Registered Agent) (Date)

12. OFFICERS AND DIRECTORS

TITLE D NAME PAPPAS, PETER C STREET ADDRESS 225 E. ROBINSON STREET, SUITE 540 CITY, ST, ZIP ORLANDO FL 32801	
TITLE NAME STREET ADDRESS CITY, ST, ZIP	
TITLE NAME STREET ADDRESS CITY, ST, ZIP	
TITLE NAME STREET ADDRESS CITY, ST, ZIP	
TITLE NAME STREET ADDRESS CITY, ST, ZIP	
TITLE NAME STREET ADDRESS CITY, ST, ZIP	

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS (if any)

TITLE NAME STREET ADDRESS CITY, ST, ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY, ST, ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY, ST, ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY, ST, ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY, ST, ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY, ST, ZIP	☐ Change ☐ Addition

14. I hereby certify that the information contained herein, including any attachments, is accurate and does not qualify for the exemptions stated in Section 1911.0[illegible], Florida Statutes. I further certify that the officers and directors listed on the annual report or supplemental annual report is true and correct and that my signature constitutes the same as if made under oath. That (if applicable) a majority of the corporation's officers or directors are not convicted felons or felons incarcerated in more than the state of Florida, and that no, none appear on Black's Law Dictionary 1979 Edition or any other word with an address.

SIGNATURE: Peter C. Pappas, PRES. PETER C. PAPPAS 4/27/95 407-648-3555
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR (Date) (Telephone Number)

0062435 CP