

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

**CORPORATION  
ANNUAL REPORT  
1995**



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

APPROVED  
AND  
FILED

95 FEB 24 PM 8:54

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DOCUMENT # P94000020170 (4)**

1. Corporation Name

**DAVID DOUGHERTY, P.A., CPA**

Principal Place of Business

**1786 HAZELTON AVENUE  
DELTONA FL 32738**

Mailing Address

**1786 HAZELTON AVENUE  
DELTONA FL 32738**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified **03/11/1994** 3a. Date of Last Report **N/A**

4. FEI Number **3227508** Applied For **59-2232950**

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

24  Zip  Country

2a. Mailing Address

26  Suite, Apt. #, etc.

27  City & State

29  Zip  Country

9. Name and Address of Current Registered Agent

**DOUGHERTY, DAVID  
1786 HAZELTON AVENUE  
DELTONA FL 32738**

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 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

(Signature typed or printed name of registered agent and the corporation)

(DATE. Registered Agent signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE **David Dougherty, President**  
NAME  
STREET ADDRESS **1786 Hazelton Ave.**  
CITY - ST - ZIP **Deltona FL 32738**

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

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CITY - ST - ZIP

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STREET ADDRESS  
CITY - ST - ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE  Change  Addition  
12 NAME  
13 STREET ADDRESS  
14 CITY - ST - ZIP

21 TITLE  Change  Addition  
22 NAME  
23 STREET ADDRESS  
24 CITY - ST - ZIP

31 TITLE  Change  Addition  
32 NAME  
33 STREET ADDRESS  
34 CITY - ST - ZIP

41 TITLE  Change  Addition  
42 NAME  
43 STREET ADDRESS  
44 CITY - ST - ZIP

51 TITLE  Change  Addition  
52 NAME  
53 STREET ADDRESS  
54 CITY - ST - ZIP

61 TITLE  Change  Addition  
62 NAME  
63 STREET ADDRESS  
64 CITY - ST - ZIP

**DEPOSITED BY BANC**

**2/24/95**  
**MS**

14. I do hereby certify that the information supplied with this form is voluntarily furnished and does not qualify for the exemption stated in Sections 110.07(3)(b), 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:

*David Dougherty*

*David Dougherty*

**1/25/95**

**904 789 0175**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE (Signature Printed)