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

PROFIT CORPORATION ANNUAL REPORT

1996



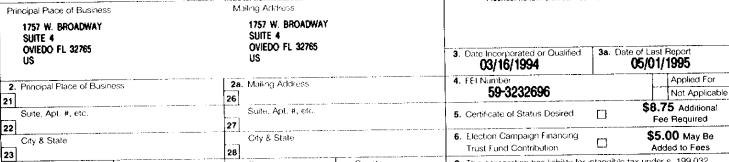
FLORIDA DEPARTMENT OF STATE Sandra B. Morthani

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT #  1. Corporation Name	P94000020311	(4
	P94000020311	(4
1. Corporation Name		

KARL A. BURGUNDER, P.A.



8. This corporation has liability for intangible tax under s. 199.032, Country  $Z_{i}$ p Country Zip ☐ Yes ☐ No Florida Statutes 30 29 24 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name BURGUNDER, KARL A Street Address (P.O. Box Number is Not Acceptable) 82 1757 W. BROADWAY 83 SUITE 4 **OVIEDO FL 32765** Zip Code 85 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 Florido Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

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12.	DP DELETE	1 1 IBUE	Change Addition
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14. I do hereby certify that the information supplied with this filling is voluntarily furnished and does not qualify for the exemption stated in Section 119 07(3)(k). 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 trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if charged, on an attachment with an address

SIGNATURE:

PEO OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)