

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P94000028205 (0)

1. Corporation Name

CORBEL/NPA, INC.



Principal Place of Business

1600 PRUDENTIAL DRIVE
JACKSONVILLE FL 32207

Mailing Address

1600 PRUDENTIAL DRIVE
JACKSONVILLE FL 32207

3. Date Incorporated or Qualified
04/08/1994

3a. Date of Last Report
03/22/1995

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

4. FEI Number

59-3244774

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

9. Name and Address of Current Registered Agent

STEFFEY, FRED H
6620 SOUTHPPOINT DRIVE SOUTH
STE. 300
JACKSONVILLE FL 32216

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 607.1506, 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 607.0506, Florida Statutes.

SIGNATURE

Signature: Typed or printed names of registered agent and title in all capital letters

Signature: Registered Agent Signature Required when registering

(DATE)

12. OFFICERS AND DIRECTORS

TITLE D
NAME MACKANOS, DONALD D
STREET ADDRESS 1600 PRUDENTIAL DRIVE
CITY-STATE-ZIP JACKSONVILLE FL 32207 ☐ DELETE

TITLE D
NAME HACK, STUART
STREET ADDRESS 1600 PRUDENTIAL DRIVE
CITY-STATE-ZIP JACKSONVILLE FL 32207 ☐ DELETE

TITLE D
NAME PROUTY, CYNTHIA L
STREET ADDRESS 1600 PRUDENTIAL DRIVE
CITY-STATE-ZIP JACKSONVILLE FL 32207 ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D,VP
1.2 NAME Michael E. Callahan
1.3 STREET ADDRESS 1660 Prudential Drive
1.4 CITY-STATE-ZIP Jacksonville, FL 32207 ☐ Change ☒ Addition

2.1 TITLE D,P
2.2 NAME Mackanos, Donald ☐ Change ☒ Addition

3.1 TITLE D,VP
3.2 NAME Hack, Stuart ☐ Change ☒ Addition

4.1 TITLE D,VP,T,& S
4.2 NAME Prouty, Cynthia L. ☐ Change ☒ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-STATE-ZIP ☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-STATE-ZIP ☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing 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 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 in an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Donald S. Mackanos, Pres. DON MACKANOS PRESIDENT 4/13/96 5888

Link

Daytime Phone #

(904) 399-

5888

CR2E034 (12/95)