

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 # P94000040278 (1)

1. Corporation Name

STEPHEN P. DRISCOLL & ASSOC., INC.



Principal Place of Business

6537-8 CAPE HATTERAS WAY, N.E.
ST. PETERSBURG FL 33702

Mailing Address

6537-8 CAPE HATTERAS WAY, N.E.
ST. PETERSBURG FL 33702

CHANGE OF ADDRESS EFFECTIVE
APRIL 15, 1996

2. Principal Place of Business

2a. Mailing Address

21 6933 GREENBRIER DR

26 6933 GREENBRIER DR

3. Date Incorporated or Qualified
05/27/1994

3a. Date of Last Report
02/28/1995

4. FEI Number

59-3248826

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

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

23 SEMINOLE FL

28 SEMINOLE FL

Zip

Country

Zip

Country

24 34647

25 Pinellas

29 34647

30 Pinellas

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

DRISCOLL, STEPHEN P
6537-8 CAPE HATTERAS WAY, N.E.
ST. PETERSBURG FL 33702

81 Name DRISCOLL, STEPHEN P.

82 Street Address (P.O. Box Number is Not Acceptable)
6933 GREENBRIER DR

83 SEMINOLE FL

84 City

FL 85 Zip Code
34647

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 title, if applicable

NOTE: Registered Agent signature required when re-registering

DATE

12. OFFICERS AND DIRECTORS

TITLE D
NAME DRISCOLL, STEPHEN P
STREET ADDRESS 6537-8 CAPE HATTERAS WAY, N.E.
CITY- ST- ZIP ST. PETERSBURG FL 33702 ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP ☐ DELETE

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NAME
STREET ADDRESS
CITY- ST- ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS 6933 GREENBRIER DR
1.4 CITY- ST- ZIP SEMINOLE FL 34647 ☐ Change ☐ Addition

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY- ST- ZIP ☐ Change ☐ Addition

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY- ST- ZIP ☐ Change ☐ Addition

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY- ST- ZIP ☐ Change ☐ Addition

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

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY- ST- 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 on an attachment with an address.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/12/96 813-525-0600
Dispute Phone #

CR2E034 (12/95)