

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 # P94000042907 (3)

1. Corporation Name

LEDYARD H. DEWEES, P.A.



Principal Place of Business

3100 S. DIXIE HIGHWAY
SUITE 17
BOCA RATON FL 33432

Mailing Address

3100 S. DIXIE HIGHWAY
SUITE 17
BOCA RATON FL 33432

2. Principal Place of Business

21 1085 S.W. Tamarind Way

Suite, Apt. #, etc.

2a. Mailing Address

26 1085 S.W. Tamarind Way

Suite, Apt. #, etc.

22 City & State

23 Boca Raton, FL

Zip

33486

Country

25 U.S.

City & State

28 Boca Raton, FL

Zip

33486

Country

30 U.S.

3. Date Incorporated or Qualified

06/03/1994

3a. Date of Last Report

03/10/1995

4. FEI Number

65-0497471

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

10. Name and Address of New Registered Agent

DEWEES, LEDYARD H
3100 S. DIXIE HIGHWAY
SUITE 17
BOCA RATON FL 33432

81 Name

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

1085 S.W. Tamarind Way

83

84 City

Boca Raton

FL

85 Zip Code

33486

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 date if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

1. TITLE ☐ DELETE

NAME DEWEES, LEDYARD H
STREET ADDRESS 3100 S. DIXIE HIGHWAY, SUITE 17
CITY-ST-ZIP BOCA RATON FL 33432

2. TITLE ☐ DELETE

NAME
STREET ADDRESS

CITY-ST-ZIP

3. TITLE ☐ DELETE

NAME
STREET ADDRESS

CITY-ST-ZIP

4. TITLE ☐ DELETE

NAME
STREET ADDRESS

CITY-ST-ZIP

5. TITLE ☐ DELETE

NAME
STREET ADDRESS

CITY-ST-ZIP

6. TITLE ☐ DELETE

NAME
STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

1085 S.W. Tamarind Way
Boca Raton, FL 33486

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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 unchanged, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-2-96

407-365-1427

CR2E034 (12/95)