

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

**CORPORATION
ANNUAL REPORT
1995**



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

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS**

95 APR -3 PM 4:55

DOCUMENT # P94000043043 (6)

1. Corporation Name

CORSE, BELL & MILLER, P.A.

Principal Place of Business

**233 EAST BAY STREET
JACKSONVILLE FL 32202**

Mailing Address

**233 EAST BAY STREET
JACKSONVILLE FL 32202**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 3a. Date of Last Report

06/06/1994

4. FEI Number

59-8249595

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

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

**CORSE, ROBERT L
233 EAST BAY STREET
JACKSONVILLE FL 32202**

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 title if applicable

(NOTE: Registered Agent signature required when resigning)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **D**
NAME **CORSE, ROBERT L**
STREET ADDRESS **233 EAST BAY STREET STE. 920**
CITY- ST- ZIP **JACKSONVILLE FL 32202**

1 1 TITLE
12 NAME
13 STREET ADDRESS
14 CITY- ST- ZIP

☐ Change ☐ Addition

TITLE **D**
NAME **BELL, THOMAS M**
STREET ADDRESS **233 EAST BAY STREET STE. 920**
CITY- ST- ZIP **JACKSONVILLE FL 32202**

2 1 TITLE
22 NAME
23 STREET ADDRESS
24 CITY- ST- ZIP

☐ Change ☐ Addition

TITLE **D**
NAME **MILLER, JAMES T**
STREET ADDRESS **233 EAST BAY STREET STE. 920**
CITY- ST- ZIP **JACKSONVILLE FL 32202**

3 1 TITLE
32 NAME
33 STREET ADDRESS
34 CITY- ST- ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

4 1 TITLE
42 NAME
43 STREET ADDRESS
44 CITY- ST- ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

5 1 TITLE
52 NAME
53 STREET ADDRESS
54 CITY- ST- ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

6 1 TITLE
62 NAME
63 STREET ADDRESS
64 CITY- ST- ZIP

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not comply for the exemption stated in Section 119.07(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 its 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 Block 14 with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/13/95

Date

634/120

Signature (Print Name)

0046000 4043

HANNON & ASSOCIATES
Certified Public Accountants

GARY F. HANNON, C.P.A.
CHARLES R. SHORRER, C.P.A.
BEVERLY L. GAGGA, C.P.A.
KATHY R. MALONE, C.P.A.

March 7, 1995

MEMBER: AMERICAN INSTITUTE OF CERTIFIED PUBLIC ACCOUNTANTS
FLORIDA INSTITUTE OF CERTIFIED PUBLIC ACCOUNTANTS

Corse, Bell & Miller, P.A.

233 EAST BAY STREET

JACKSONVILLE, FL 32202

Dear Client:

The following tax returns are enclosed:

N/A 1995 TANGIBLE PERSONAL PROPERTY TAX RETURN

This return should be dated, signed and filed by April 1, 1995. File with: Ernie Mastroianni, Duval County Appraiser, 231 East Forsyth Street, Suite 270, Jacksonville, Florida 32202-3361.

N/A 1995 INTANGIBLE PERSONAL PROPERTY TAX RETURN

This return should be dated, signed and filed by _____ in order to take advantage of the discount already computed. File with: Florida Department of Revenue, 5050 W. Tennessee Street, Tallahassee, Florida 32399-0145. Your remittance, made payable to the "Florida Department of Revenue" in the amount of \$ _____, should be attached to the return before filing.

✓ 1995 CORPORATION ANNUAL REPORT

This report should be dated, signed, and filed by May 1, 1995. Payment in the amount of \$200.00 made payable to the "Secretary of State" should accompany the report.

File with:

☒ Division of Corporations
Annual Reports
Post Office Box 1500
Tallahassee, Florida 32302-1500

☐ Corporate Records Bureau
Division of Corporations
Post Office Box 6327
Tallahassee, Florida 32314

_____ We have noted in our files that you are to prepare the Corporation Annual Report. If you wish for us to prepare this, please contact our office.

We have retained a copy of each return in your tax file.

Very truly yours,

HANNON & ASSOCIATES

Enclosure(s)

By: slb