FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION
ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
Division of Corporations

"APPROVED AND FILED"
95 MAY -1 AM 9:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P94000049048 (9)**

1. Corporate Name
LEWIS B. HUNTER, JR., P.A.

Principal Place of Business
4217 BAYMEADOWS RD
JACKSONVILLE FL 32217

Mailing Address
4217 BAYMEADOWS RD
JACKSONVILLE FL 32217

DO NOT WRITE IN THIS SPACE

3. Date of Last Report: **06/30/1994**
3a. Date of Last Report:

4. FEI Number: **52-1684278** — 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

21 Principal Place of Business
22 Suite, Apt. #, etc.
23 City, State
24 Zip
25 Country
26 Mailing Address
27 Suite, Apt. #, etc.
28 City, State
29 Zip
30 Country

8. The corporation has/will be engaging in business in Florida Counties: ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

HUNTER, LEWIS B JR.
4217 BAYMEADOWS RD
JACKSONVILLE FL 32217

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 Section 607.0505, F.S. (Section 607.1008, Florida Statutes), the above named corporation submits the following statement of intent to change its registered office or registered agent or both in the State of Florida. The corporation is authorized to transact business in Florida, and the appointed registered agent has agreed to act in this capacity. I further acknowledge that the provisions of Section 607.0505, F.S. (Section 607.1008, Florida Statutes), relating to registered agents, are hereby accepted.

SIGNATURE

12. OFFICERS AND DIRECTORS

D
HUNTER, LEWIS B JR.
4402 BARRINGTON OAKS DR
JACKSONVILLE FL 32257

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 19

☐ Change ☐ Add

14. I hereby certify that the information supplied with this report is complete and accurate, and that I am aware that false information submitted to a filing officer is a third degree felony as provided for in Section 817.155, Florida Statutes. I further certify that this information indicated on the annual report or supplemental annual report is in accordance with Section 607.0505 (607.1008), Florida Statutes, 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 a receiver or trustee or other fiduciary pursuant to Chapter 607, Florida Statutes, and that this report is signed in accordance with Section 607.0505 (607.1008), Florida Statutes.

SIGNATURE: 4/19/95 901/367 0852

SIGNATURE AND TITLE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

0018140 CP