

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

FILED  
Apr 30 1996 8:00 am  
Secretary of State

DOCUMENT # P94000052119 (2)

1. Corporation Name

1ST SELECT, INCORPORATED



Principal Place of Business

Mailing Address

2536 COUNTRYSIDE BLVD  
6TH FLR  
CLEARWATER FL 34623  
US

250 TEQUESTA DRIVE  
SUITE 300  
TEQUESTA FL 33469

2. Principal Place of Business

2a. Mailing Address

21 2536 Countryside Blvd

26 2536 Countryside Blvd

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 Fourth Floor

27 Sixth Floor

City & State

City & State

23 Clearwater, Florida

28 Clearwater, Florida

Zip

Country

Zip

Country

24 34623

25 US

29 34623

30 US

3. Date Incorporated or Qualified

07/14/1994

3a. Date of Last Report

03/23/1995

4. FEI Number

59-3261048

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

\$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

MALONEY, JOHN L  
5335 68TH STREET NORTH  
ST. PETERSBURG FL 33709

81 Name Heather L. Doudna

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

2536 Countryside Blvd

83 Sixth Floor

84 City

Clearwater

FL

85 Zip Code 34623

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 obligation of, Section 607.0505, Florida Statutes.

SIGNATURE

*Heather L. Doudna*

Heather L. Doudna

2/19/1996

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE C ☐ DELETE

NAME BOESCH, GARY  
STREET ADDRESS 2536 COUNTRYSIDE BLVD., 6TH FLOOR  
CITY-ST-ZIP CLEARWATER FL

1.1 TITLE D/C ☒ Change ☐ Addition

1.2 NAME Boesch, Gary  
1.3 STREET ADDRESS 2536 Countryside Blvd, Sixth Floor  
1.4 CITY-ST-ZIP Clearwater, FL 34623

TITLE D ☐ DELETE

NAME KEMP, LARRY  
STREET ADDRESS 2536 COUNTRYSIDE BLVD., 6TH FLOOR  
CITY-ST-ZIP CLEARWATER FL 34623

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

TITLE P ☐ DELETE

NAME GRAHAM, MARK  
STREET ADDRESS 901 NORTHPOINT PARKWAY, SUITE 304  
CITY-ST-ZIP WEST PALM BEACH FL

3.1 TITLE P/D ☒ Change ☐ Addition

3.2 NAME Graham, Mark  
3.3 STREET ADDRESS 2536 Countryside Blvd, Fourth FL  
3.4 CITY-ST-ZIP Clearwater, FL 34623

TITLE VP ☐ DELETE

NAME BARRY, ROBERT  
STREET ADDRESS 2536 COUNTRYSIDE BLVD 6TH FLR  
CITY-ST-ZIP CLEARWATER FL

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

TITLE S ☐ DELETE

NAME ADKINS, SHIRLEY  
STREET ADDRESS 2536 COUNTRYSIDE BLVD 6TH FLR  
CITY-ST-ZIP CLEARWATER FL

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

TITLE T ☐ DELETE

NAME THORNTON, R. MAURY  
STREET ADDRESS 2536 COUNTRYSIDE BLVD 6TH FLR  
CITY-ST-ZIP CLEARWATER FL

6.1 TITLE ☐ Change ☐ Addition

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 if changed, or on an attachment with an address.

SIGNATURE

*R. Maury Thornton*

R. Maury Thornton, Treas 2/19/96 (813)726

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

0726

CR2E034 (12/95)