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

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortnam Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT #

1996

P94000056488 (7)

ALL BOARD CERTIFIED ATTORNEY REFERRAL SERVICE. I NC.

Principal Place of Business 311 SOUTH SECOND ST SUITE 200 FORT PIERCE FL 34950

2. Principal Place of Business

Suite, Apt. #, etc.

Crty & State

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Zφ

11. Pursuant

Mading Address P.O. BOX 1270

2a. Mailing Address

City & State

Zip.

Suite Apt. #, etc

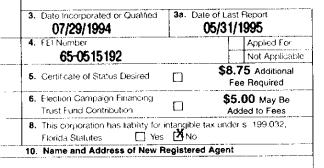
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FORT PIERCE FL 34954



WEINBAUM, CHET E 311 SOUTH 2ND ST. FORT PIERCE FL 34950

Country

9. Name and Address of Current Registered Agent

25

	84		City FL	85	Zip Code		
to the provisions of Sections 607.05.02 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office red 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							

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

Country

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or registered familiar with	d agent, or both, in the State of Florida. Such on, , and accept the obligations of, Section 607.050	ange was authorized 5, Florida Statutes	by the corporation's boar	d of directors. I hereby accept the appointment as registered	ragent. Fam
SIGNATURE.	gratine ity est or printer in a recollective strategy translation that i ex-	atos iNÚÍÉ	Projecte of Agent signature required		
12.	OFFICERS AND DIRECTOR	RS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTO	
TITLE	PD	DELETE	1 1 THLE	Change	Addition
NAME	NEILL, RICHARD V JR.		1.2 NAME		
STREET ADDRESS	311 SOUTH SECOND ST		1.3 SI'REET ADDRESS		
CITY-ST-ZIP	FORT PIERCE FL		1.4 CiTY+ST+ZIF		
TITLE	VT	DELFTE	2 1 1/11/5	☐ Change	Addition
NAME	TIERNEY, J. S III		2.2 NAME		
STREET ADDRESS	311 SOUTH SECOND ST		2.3 STREET ADDRESS		
CITY - ST - ZIP	FORT PIERCE FL		24 CITY ST ZIP		
TITLE	S	☐ DELETE	3 1 TITLE	☐ Change	Control Addition
NAME	WEINBAUM, CHET E		3.2 NAMC		
STREET ADDRESS	311 SOUTH SECOND ST.		3.3 STHEET ADDRESS		
CITY-ST-ZIP	FORT PIERCE FL		34 CHY ST ZIF		
TITLE		DELETE	4 11005	☐ Change	☐ Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
C-TY-ST-ZIP			4.4.0TY - ST - 7/P		
1itut		DELETE	5 1 TIME	Change	☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5 3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CiTY - ST. ZIP		
TITLE		☐ DELF TE	6 1 THILE	☐ Change	Addition
NAME			6.2 NAME		
STREET ADDRESS			6 3 STREET ADDRESS		
CiTY-S1-ZiF			64 CHY-ST ZP		

I do hereby certify that the information supplied with this filing is voluntaril, furnished and closs 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 office or greator of the congruition or the freedese 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 charged, or enjagouscent ment and address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAM

Richard V. Nell, 20 OF SIGNING OFFICER OR DIRECTOR

5/28/94 407-464-8200