

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra E. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000058986 (8)

1. Corporation Name

GARDNER, WILKES, SHAHEEN & CANDELORA, P.A.



Principal Place of Business

501 E. KENNEDY BLVD.
SUITE 1250
TAMPA FL 33602
US

Mailing Address

P.O. BOX 1810
SUITE 4100
TAMPA FL 33601
US

3. Date Incorporated or Qualified
08/22/1994

3a. Date of Last Report
07/17/1995

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number
59-3263600

Applied For
Not Applicable

22 Suite, Apt. #, etc.

Suite, Apt. #, etc.

23 City & State

City & State

24 Zip

Country

29 Zip

Country

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

GARDNER, MERRITT A
501 E KENNEDY BLVD.
SUITE 1250
TAMPA FL 33602

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 the filer if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY- ST- ZIP
P
CANDELORA, RICHARD W.
501 E. KENNEDY BLVD, SUITE 1250
TAMPA FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY- ST- ZIP
ST
SHAHEEN, JOSEPH L. JR.
501 E. KENNEDY BLVD, SUITE 1250
TAMPA FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY- ST- ZIP
VP
GARDNER, MERRITT A.
501 E. KENNEDY BLVD, SUITE 1250
TAMPA FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY- ST- ZIP
VP
WILKES, RICHARD B.
501 E. KENNEDY BLVD, SUITE 1250
TAMPA FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
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 or both, changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5-3-96

813-221-8000

Date

Daytime Phone #

CR2E034 (12/95)