

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

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Jun 03 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P94000062752 (8)

1. Corporation Name
CLINCH & ASSOCIATES, INC.



Principal Place of Business 2201 CANTU CT SUITE 200 SARASOTA FL 34232 US	Mailing Address 2201 CANTU CT SUITE 200 SARASOTA FL 34232-6255 US
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2. Principal Place of Business 21 Sarasota FL Suite, Apt. #, etc. 22 Ste. 200 City & State 23 Sarasota FL Zip 24 34232	2a. Mailing Address 26 2201 Cantu Ct. Suite, Apt. #, etc. 27 Ste 200 City & State 28 Sarasota FL Zip 29 34232
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3. Date Incorporated or Qualified 08/22/1994	3a. Date of Last Report 07/02/1996
4. FEI Number 65-0525286	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent COX, RICHARD E 11609 NW 62ND PLACE GAINESVILLE FL 32608	
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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 *James P. Clinch, Pres.* **James P. Clinch, Pres.** **5-23-97**
Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent's signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS	
TITLE	<input type="checkbox"/> DELETE
NAME	COX, RICHARD E
STREET ADDRESS	11609 NW 62ND PLACE
CITY-ST-ZIP	GAINESVILLE FL 32608
TITLE	<input type="checkbox"/> DELETE
NAME	COX, MARTINE G
STREET ADDRESS	11609 NW 62 PL
CITY-ST-ZIP	GAINESVILLE FL
TITLE	<input type="checkbox"/> DELETE
NAME	CLINCH, JAMES P
STREET ADDRESS	608 HIBISCUS DR
CITY-ST-ZIP	VENICE FL
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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 does not qualify for the exemption stated in Section 119.07(3)(c), 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 *James P. Clinch, Pres.* **James P. Clinch, Pres.** **5-23-97** **941/279-9901**

CR2E034 (9/96)