

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

DOCUMENT # P94000087319 (7)

1. Corporation Name

FOSTER & KELLY, P.A.



Principal Place of Business

20 N. ORANGE AVE.
ORLANDO FL 32801

Mailing Address

P.O. BOX 3587
ORLANDO FL 32802

2. Principal Place of Business

2a. Mailing Address

21 State, Apt. #, etc.
22 Suite 600
23 City & State

26 State, Apt. #, etc.
27 City & State

24 Zip
25 Country

29 Zip
30 Country

3. Date Incorporated or Qualified

01/01/1995

3a. Date of Last Report

4. FE Number

59-3283356

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

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

FOSTER, JAMES E
20 N. ORANGE AVE.
ORLANDO FL 32801

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

(Signature of Registered Agent)

(Signature of Registered Agent)

DATE

12. OFFICERS AND DIRECTORS

TITLE	D	FOSTER, JAMES E	20 N. ORANGE AVE.	ORLANDO FL 32801
TITLE	D	KELLY, ROGER A	20 N. ORANGE AVE.	ORLANDO FL 32801
TITLE	D	FOSTER, TOMPKINS A	20 N. ORANGE AVE.	ORLANDO FL 32801
TITLE	D	LINDEMAN, WILLIAM M	20 N. ORANGE AVE.	ORLANDO FL 32801
TITLE	D	MATTHEWS, DANIEL R	20 N. ORANGE AVE.	ORLANDO FL 32801

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	12. NAME	13. STREET ADDRESS	14. CITY - ST - ZIP
2. TITLE	22. NAME	23. STREET ADDRESS	24. CITY - ST - ZIP
3. TITLE	32. NAME	33. STREET ADDRESS	34. CITY - ST - ZIP
4. TITLE	42. NAME	43. STREET ADDRESS	44. CITY - ST - ZIP
5. TITLE	52. NAME	53. STREET ADDRESS	54. CITY - ST - ZIP
6. TITLE	62. NAME	63. STREET ADDRESS	64. CITY - ST - ZIP

14. I do hereby certify that the information submitted 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 Book 12 or Book 13 if changed, or on an attachment with an address.

SIGNATURE:

(Signature of Registered Agent)

2-8-96 407-423-4000

CR2E034 (12/95)