

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morfitt
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 MAR 27 AM 10:34

DOCUMENT # P94000087848 (5)

1. Corporation Name

A CONSULTING COLLECTIVE COMPANY

Principal Place of Business

1601 ARLINGTON DRIVE
WEST PALM BEACH FL 33406

Mailing Address

1601 ARLINGTON DRIVE
WEST PALM BEACH FL 33406

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/02/1994

3a. Date of Last Report

N/A

4. FBI Number

65-0536282

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. 109.032,
Florida Statutes

☒ Yes

☐ No

9. Name and Address of Current Registered Agent

KEIR, SUSAN
1601 ARLINGTON DRIVE
WEST PALM BEACH FL 33406

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 person named as registered agent and the Approver)

(Signature of Registered Agent required when registering)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	D/P/TIS
NAME	KEIR, SUSAN	1.2 NAME	Keir, Susan
STREET ADDRESS	1601 ARLINGTON DRIVE	1.3 STREET ADDRESS	1601 Arlington Drive
CITY, ST, ZIP	WEST PALM BEACH FL 33406	1.4 CITY, ST, ZIP	West Palm Beach, FL 33406
TITLE		2.1 TITLE	V
NAME		2.2 NAME	Keir, David
STREET ADDRESS		2.3 STREET ADDRESS	1601 Arlington Drive
CITY, ST, ZIP		2.4 CITY, ST, ZIP	West Palm Beach, FL 33406
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY, ST, ZIP		3.4 CITY, ST, ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY, ST, ZIP		4.4 CITY, ST, ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY, ST, ZIP		5.4 CITY, ST, ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY, ST, ZIP		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)(b), 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 of this report, or on an attachment with an address.

SIGNATURE: *Susan Keir* Susan Keir
SIGNATURE AND TYPE (OR PRINTED NAME OF WRITING OFFICER OR DIRECTOR)

3/14/95

407-642-4666