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Mailing Address

SUITE C

25 W NEW HAVEN AVE

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

25 W NEW HAVEN AVE

SUITE C



GLAND C. BUSCU.

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Feb 06 1997 8:00am

Secretary of State

Harvery 30, 1997 (401) 727-9888

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9500006401 (0)

DIANE CHRISTIE BACCUS HORSLEY, P.A.

MELBOURNE FL 32901 MELBOURNE FL 32901-4463 3. Date Incorporated or Qualified 3a. Date of Last Report 01/23/1995 01/17/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-3291423 21 26 Not Applicable Suite, Apt #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Ζip Country Country Zφ 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes 24 25 29 30 Yes No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent BACCUS HORSLEY, DIANE C 81 Name 25 W NEW HAVEN AVE 82 Street Address (P.O. Box Number is Not Acceptable) **SUITE C MELBOURNE FL 32901** 83 64 City Zip Code 85 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, Typied or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 96/6) DELETE Addition TITLE 1.1 TITLE Change BACCUS HORSLEY, DIANE C NAME 1.2 NAME 25 W NEW HAVEN AVE SUITE C STREET ADDRESS 1.3 STREET ADDRESS MELBOURNE FL 32901 CITY-ST-ZIP 1.4 CITY - ST-ZIP DELETE Change TILLE 2.1 TITLE Addition NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY - ST - ZIF 2.4 CITY-ST-ZIP DELETE THLE 3.1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY - ST - ZIP 3 4. DITY-ST-ZIP DELETE TITLE 4.1 TITLE ☐ Addition Change NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CiTY - ST - ZIF 4.4 CITY-ST-ZIP DELETE TITLE Addition 5.1 TITLE Change NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY - ST - ZIP 5.4 CiTY - ST - ZiP DELETE THE 61 TITLE Change Addition NAME 62 NAME STREET ADDRESS 63 STREET ADDRESS CITY-\$1-ZIP 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)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is frue 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.