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

4-24-96 B-4371-C

DOCUMENT # **P95000009902 (4)**

1. Corporation Name

BOYD LAW FIRM, P.A.

Principal Place of Business

106 E COLLEGE AVE
SUITE 900
TALLAHASSEE FL 32301

Mailing Address

106 E COLLEGE AVE
SUITE 900
TALLAHASSEE FL 32301

3. Date Incorporated or Qualified: 02/06/1995

3a. Date of Last Report

4. FEI Number: EIN 59-3294381

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 … Florida Statutes ☑ Yes ☐ No

2. Principal Place of Business
21
Suite, Apt. #, etc.
22
City & State
23
Zip
24
Country
25

2a. Mailing Address
26
Suite, Apt. #, etc.
27
City & State
28
Zip
29
Country
30

9. Name and Address of Current Registered Agent

BOYD, ROBERT J
106 E COLLEGE AVE
SUITE 900
TALLAHASSEE FL 32301

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 … 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 … Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

TITLE	PRESIDENT	☐ DELETE
NAME	WILLIAM L. BOYD IV	
STREET ADDRESS	106 E. COLLEGE AVE SUITE 900	
CITY-ST-ZIP	TALLAHASSEE, FL. 32301	
TITLE	VICE-PRESIDENT / TREASURER	☐ DELETE
NAME	ROBERT J. BOYD	
STREET ADDRESS	106 E. COLLEGE AVE. SUITE 900	
CITY-ST-ZIP	TALLAHASSEE, FL. 32301	
TITLE	SECRETARY	☐ DELETE
NAME	LAURA BOYD PEARCE	
STREET ADDRESS	106 E. COLLEGE AVE. SUITE 900	
CITY-ST-ZIP	TALLAHASSEE, FL. 32301	
TITLE		☐ DELETE
NAME	JILL M. BOYD	
STREET ADDRESS	106 E. COLLEGE AVE. SUITE 900	
CITY-ST-ZIP	TALLAHASSEE, FL. 32301	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS

1-1 TITLE		☐ Change ☐ Addition
1-2 NAME		
1-3 STREET ADDRESS		
1-4 CITY-ST-ZIP		
2-1 TITLE		☐ Change ☐ Addition
2-2 NAME		
2-3 STREET ADDRESS		
2-4 CITY-ST-ZIP		
3-1 TITLE		☐ Change ☐ Addition
3-2 NAME		
3-3 STREET ADDRESS		
3-4 CITY-ST-ZIP		
4-1 TITLE		☐ Change ☐ Addition
4-2 NAME		
4-3 STREET ADDRESS		
4-4 CITY-ST-ZIP		
5-1 TITLE		☐ Change ☐ Addition
5-2 NAME		
5-3 STREET ADDRESS		
5-4 CITY-ST-ZIP		
6-1 TITLE		
6-2 NAME		
6-3 STREET ADDRESS		
6-4 CITY-ST-ZIP		

CR2E034 (12/95)

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)(i), 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: Robert J. Boyd — ROBERT J. BOYD 4-19-96 904-681-7381

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
VP / TREASURER / DIRECTOR