SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: $225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $375.)

PROFIT CORPORATION ANNUAL REPORT
1996

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

DOCUMENT # **P95000010546 (6)**

1. Corporation Name
DONALD CODY AND ASSOCIATES, INC.

Principal Place of Business	Mailing Address
DONALD M. CODY 4654 ASHTON CT. NAPLES FL 33962	DONALD M. CODY 4654 ASHTON CT. NAPLES FL 33962

3. Date Incorporated or Qualified: 02/06/1995
3a. Date of Last Report:

2. Principal Place of Business	2a. Mailing Address
21 100 AVIATION DRIVE S	26 100 AVIATION DRIVE S
Suite, Apt. #, etc. 22 SUITE 201	Suite, Apt. #, etc. 27 SUITE 201
City & State 23 NAPLES FL	City & State 28 NAPLES FL
Zip / Country 24 34104 / 25 USA	Zip / Country 29 34104 / 30 USA

4. FEI Number: 65 0564950 ☐ 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	10. Name and Address of New Registered Agent
~~CODY, DONALD M~~ ~~4001 TAMIAMI TR N~~ ~~SUITE 370~~ ~~NAPLES FL 33940~~	81 Name: CODY, DONALD M 82 Street Address (P.O. Box Number is Not Acceptable): 100 AVIATION DRIVE SOUTH 83: SUITE 201 84 City: NAPLES FL 85 Zip Code: 34104

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] 7/10/96
Signature of new registered agent, or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D CODY, DONALD M 4001 TAMIAMI TR N SUITE 370 NAPLES FL 33940	☐ DELETE	11 TITLE / 12 NAME / 13 STREET ADDRESS / 14 CITY-ST-ZIP	PRESIDENT CODY, DONALD M 100 AVIATION DRIVE SOUTH #201 NAPLES FL 34104	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	~~CODY, LOR~~	☐ DELETE	21 TITLE / 22 NAME / 23 STREET ADDRESS / 24 CITY-ST-ZIP	TREASURER CODY, LORRAINE 100 AVIATION DR SOUTH #201 NAPLES FL 34104	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	31 TITLE / 32 NAME / 33 STREET ADDRESS / 34 CITY-ST-ZIP	V.P. THERESA W RANDALL 100 AVIATION DRIVE SOUTH #201 NAPLES FL 34104	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	41 TITLE / 42 NAME / 43 STREET ADDRESS / 44 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	51 TITLE / 52 NAME / 53 STREET ADDRESS / 54 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	61 TITLE / 62 NAME / 63 STREET ADDRESS / 64 CITY-ST-ZIP		☐ Change ☐ Addition

CR2E034 (3/96)

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)(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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: [signature] 7/10/96 941 434 4121
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #