

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.  
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)


APPROVED  
AND  
FILED  
fg102

1997 JUL 23 PM 12:52

FLORIDA DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

PROFIT CORPORATION ANNUAL REPORT <b>1997</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P95000026238 (2)**

1. Corporation Name  
**LAURA ANNE OLSON, P.A.**

Principal Place of Business

**3820 NORTDALE BLVD  
SUITE 312B  
TAMPA FL 33624**

Mailing Address

**P.O. BOX 499  
TAMPA FL 33601-0499  
US**

2. Principal Place of Business

21 **712 South Oregon Ave**

22 **Tampa, FL**

23 **33606**

24 **USA**

2a. Mailing Address

26 **712 South Oregon Ave**

27 **Tampa, FL**

28 **33606**

29 **WA**

3. Date Incorporated or Qualified  
**03/30/1995**

3a. Date of Last Report  
**06/25/1996**

4. FEI Number  
**59-3315548**

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 owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

**OLSON, LAURA A  
13131 S HOWARD AVENUE  
TAMPA FL 33606**

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, typed or printed name of registered agent and title of applicant

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE  
NAME **PSTD OLSON, LAURA A**  
STREET ADDRESS **13131 S HOWARD AVE**  
CITY-ST-ZIP **TAMPA FL 33606**

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

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 ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
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 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

**LAURA A OLSON**

**7/13/1997 (012)253 3073**

CR2E034 (4/97)

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**LAWGROUP**  
A PROFESSIONAL ASSOCIATION  

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ATTORNEYS AT LAW

LAURA A. OLSON  
DAVID C. BEARDEN  
712 SOUTH OREGON AVENUE  
TAMPA, FLORIDA 33606

TELEPHONE/FAX: (813) 253-3073

July 21, 1997

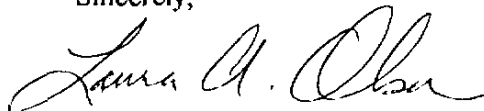
Florida Department of State  
Annual Report Filings  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

To whom it may concern:

My business relocated in October 1996. A notice of change of address was sent to the Division of Corporations. Despite this notice of change of address, the 1997 Annual Report Packet was sent to a prior address. Only recently was that mail forwarded to my new office, and by that time the second notice, along with a penalty, had already been distributed. Upon receipt, I immediately called the Division of Corporations at (904) 488-9000, and alerted the Division of Corporations of this problem. I was told to send a check in the amount of \$165.00 to the above address along with this letter.

Thank you for accepting payment without the \$385.00 late fee. The correct address for future mailings is: Laura Anne Olson, P.A., 712 S. Oregon Avenue, Tampa, Florida 33606. If you have any questions, please call me at the above number.

Sincerely,



Laura A. Olson

LAO/ng