FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # P95000049478 (7)

PLANNING & RESEARCH GROUP, INC.

25

SNYDER, THERESA L

Principal Place of Business 2400 ORMSBY CIRCLE WEST JACKSONVILLE FL 32210

2. Principal Place of Business

Suite, Apt. #, etc.

SIGNATURE:

City & State

21

22

23

24

Mailing Address

2a. Mailing Address

City & State

Suite, Apt #, etc.

26

27

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9. Name and Address of Current Registered Agent

2400 ORMSBY CIRCLE WEST JACKSONVILLE FL 32210-3928

FILED Apr 25 1997 8:00am Secretary of State



8. This corporation has liability for intangible tax under s. 199.032,

10. Name and Address of New Registered Agent

Yes No

Sa. Date of Last Report

Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

Not Applicable

04/05/1996

3. Date Incorporated or Qualified

06/19/1995

59-3325894

5. Certificate of Status Desired

6. Election Campaign Financing

Trust Fund Contribution

Florida Statutes

4. FEI Number

JACKSONMILLE FL 32210		82 Street	82 Street Address (P.O. Box Number is Not Acceptable)		
		83			
		84 City		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 Some are typical or provided name of tragstered agent and title it applicable. (NOTE: Registered Agent appraising required when relinstating). DATE					
12.	Signature, type discipilited name of registereo agent and title it applicable. (NOTE: OFFICERS AND DIRECTORS	Registered Agent signature	required when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTO	100 INI 10	
1011	D DELETE	1.1 TITLE	Change		
HAME	SNYDER, THERESA L	1.2 NAME	Orango	C. roumon	
	2400 ORMSBY CIRCLE WEST			1	
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NAME	Dittie	•	in the control of the	C) Addition	
i i		2.2 NAME		1	
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titte	DELETE	61 TITLE	☐ Change	Addition	
NAMI	i	6.2 NAME		j	
STREET AMURESS		6.3 STREET ADDRESS			
CHY-ST-70P		6.4 CITY-ST-ZIP			
14. I do hereby certify that the information supplied with this filling 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 off-cer 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.					

Country

Name

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