

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P95000067520 (3)

1. Corporation Name

SANDRA S. SUTER, P.A.



Principal Place of Business

12734 KENWOOD LN., STE. 49
FT. MYERS FL 33907

Mailing Address

12734 KENWOOD LN., STE. 49
FT. MYERS FL 33907

3. Date Incorporated or Qualified
08/31/1995

3a. Date of Last Report

2. Principal Place of Business

21 291 Palermo Circle

2a. Mailing Address

26 291 Palermo Circle

State, Apt. #, etc.

State, Apt. #, etc.

4. FEI Number

65-0610996

Applied For

Not Applicable

22

27

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

23 City & State

FT. MYERS BEACH, FL

28 City & State

FT. MYERS BEACH, FL

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

24 Zip

33931

25 Country

US

29 Zip

33931

30 Country

US

8. This corporation has liability for intangible tax under s. 199.032
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

WALLACE, GARY F
12734 KENWOOD LN., STE. 49
FT. MYERS FL 33907

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, which 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

G. Wallace, CPA

1/31/96

12. OFFICERS AND DIRECTORS

11.1 TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
11.2 TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
11.3 TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
11.4 TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
11.5 TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

12.1 TITLE
12.2 NAME
12.3 STREET ADDRESS
12.4 CITY-ST-ZIP
12.5 TITLE
12.6 NAME
12.7 STREET ADDRESS
12.8 CITY-ST-ZIP
12.9 TITLE
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12.92 CITY-ST-ZIP
12.93 TITLE
12.94 NAME
12.95 STREET ADDRESS
12.96 CITY-ST-ZIP
12.97 TITLE
12.98 NAME
12.99 STREET ADDRESS
12.100 CITY-ST-ZIP

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)(g), 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:

Sandra S. Suter, PA

Sandra S. Suter, PA

1-31-96

941-463-0965

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

City/Phone #

CR2E034 (12/95)