

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

DOCUMENT # **P95000069448 (5)**

1. Corporation Name

GEORGE C. FAUGL, JR., P.A.



Principal Place of Business

Mailing Address

19651 BRUCE B. DOWNS BLVD., STE. D-3112
TAMPA FL 33647

19651 BRUCE B. DOWNS BLVD., STE. D-3112
TAMPA FL 33647

3. Date Incorporated or Qualified

08/31/1995

3a. Date of Last Report

59-3335667

2. Principal Place of Business

2a. Mailing Address

21 19651 BRUCE B. DOWNS BLVD.

26 19651 BRUCE B. DOWNS BLVD.

4. FEI Number

59-3335667

Applied For

Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 SUITE E6-4

27 SUITE E6-4

5. Certificate of Status Desired

\$8.75 Additional Fee Required

City & State

City & State

23 TAMPA, FLORIDA

28 TAMPA, FLORIDA

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

Zip

Country

Zip

Country

24 33647

25 Hillsborough

29 33647

30 Hillsborough

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

FAUGL, GEORGE C JR.
19651 BRUCE B. DOWNS BLVD., STE-D-3112
TAMPA FL 33647

81 Name **GEORGE C FAUGL JR**

82 Street Address (P.O. Box Number is Not Acceptable)
19651 BRUCE B. DOWNS Blvd.

83 **SUITE E6-4**

84 City **TAMPA**

FL

85 Zip Code **33647**

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

George C Faugl Jr

(NOTE: Registered Agent signature required when reinstating)

4/20/96

DATE

12. OFFICERS AND DIRECTORS

TITLE DELETE
NAME **PRESIDENT**
STREET ADDRESS **GEORGE C. FAUGL, JR.**
CITY-ST-ZIP **19651 BRUCE B. DOWNS Blvd. Suite E6-4**
Tampa, FL 33647

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

1.1 TITLE Change Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

2.1 TITLE Change Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

3.1 TITLE Change Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE Change Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE Change Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 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)(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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

George C Faugl Jr
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/20/96

DATE

(813) 991-7957

Daytime Phone #

CR2E034 (12/95)