

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 # P95000083509 (6)

1. Corporation Name

DARIN & ASSOCIATES, P.A.



Principal Place of Business

4096 WINTERWOOD CT
ORLANDO FL 32812

Mailing Address

4096 WINTERWOOD CT
ORLANDO FL 32812

3. Date Incorporated or Qualified
10/27/1995

3a. Date of Last Report

2. Principal Place of Business

21 1101 N. Lake Destiny Rd.

Suite, Apt. #, etc.

22 Suite 130

City & State

23 Maitland, FL

Zip

24 32751

Country

25 Orange

2a. Mailing Address

26 1101 N. Lake Destiny Rd.

Suite, Apt. #, etc.

27 Suite 130

City & State

28 Maitland, FL

Zip

29 32751

Country

30 Orange

4. FEI Number

59-3030188

Applied For

Not Applicable

5. Certificate of Status Desired

XX

\$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

DARIN, JOHN R II
4096 WINTERWOOD CT
ORLANDO FL 32812

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 is submitting 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, hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0502, Florida Statutes.

SIGNATURE

John R. Darin, II, President

3/1/96

12. OFFICERS AND DIRECTORS

TITLE	President	☐ DELETE
NAME	John R. Darin, II	
STREET ADDRESS	1101 N. Lake Destiny Ste.130	
CITY-STATE-ZIP	Maitland, FL 32751	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	☐ Change ☐ Addition
1. TITLE	
2. NAME	
3. STREET ADDRESS	
4. CITY-STATE-ZIP	
5. TITLE	
6. NAME	
7. STREET ADDRESS	
8. CITY-STATE-ZIP	
9. TITLE	
10. NAME	
11. STREET ADDRESS	
12. CITY-STATE-ZIP	
13. TITLE	
14. NAME	
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18. NAME	
19. STREET ADDRESS	
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58. NAME	
59. STREET ADDRESS	
60. CITY-STATE-ZIP	
61. TITLE	
62. NAME	
63. STREET ADDRESS	
64. CITY-STATE-ZIP	

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/1/96

(407) 660-0100

CR2E034 (12/95)