

51-97 B-5983 C  
FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED  
May 01 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # P96000010859 (2)

1. Corporation Name

BECKER ADVISORS, INCORPORATED



Principal Place of Business

114 CANAL STREET STE B  
NEW SMYRNA BEACH FL 32170

Mailing Address

POST OFFICE BOX 2418  
NEW SMYRNA BEACH FL 32170-2118

(DISCONTINUED)

2. Principal Place of Business

21 221 N. CAUSEWAY STE C

Suite, Apt. #, etc.

22 STE C

City & State

23 NEW SMYRNA BEACH FL

Zip

24 32169

Country

25 USA

2a. Mailing Address

26 221 N. CAUSEWAY

Suite, Apt. #, etc.

27 STE C

City & State

28 NEW SMYRNA BEACH, FL

Zip

29 32169

Country

30 USA

3. Date Incorporated or Qualified

01/31/1996

3a. Date of Last Report

4. FEI Number

59-3358570

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 has liability for intangible tax under s. 199.032,  
Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

NELSON, CAROLE  
1523 UMBRELLA TREE DRIVE  
EDGEWATER FL 32132

10. Name and Address of New Registered Agent

81 Name LISA BECKER

82 Street Address (P.O. Box Number is Not Acceptable)

221 N. CAUSEWAY

83 STE C

84 City NEW SMYRNA BEACH FL

85 Zip Code

32169

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

Lisa Becker

LISA BECKER

4.25.97

12. OFFICERS AND DIRECTORS

TITLE PSTD

NAME BECKER, LISA C

STREET ADDRESS 114 CANAL STREET STE B

CITY-ST-ZIP NEW SMYRNA BEACH FL 32170

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

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NAME

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TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

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 in an attachment with an address.

SIGNATURE

Lisa Becker

4.25.97 904-427-0000

CR2E034 (9/96)