


SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.  
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

FILED  
Jun 02 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
DOCUMENT # P960000032736 1. Corporation Name FERLITA, NUTTER, ROSELLO & NEWMAN, PA		

Principal Place of Business 610 AZEEL ST TAMPA, FL. 33606-2273	Mailing Address 610 AZEEL ST TAMPA, FL. 33606-2273
--	--

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 4-10-96		3a. Date of Last Report	
21 Suite, Apt. #, etc.	22 City & State	26 Suite, Apt. #, etc.	27 City & State	5. Certificate of Status Desired <input type="checkbox"/>		Applied For Not Applicable	
23 Zip	25 Country	29 Zip	30 Country	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$8.75 Additional Fee Required	
24		28		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No		\$5.00 May Be Added to Fees	

9. Name and Address of Current Registered Agent NUTTER, ROBERT H. 610 W. AZEEL ST. TAMPA, FL. 33606-2273		10. Name and Address of New Registered Agent	
81 Name		82 Street Address (P.O. Box Number is Not Acceptable)	
83		84 City	
85 Zip Code		FL	

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	President	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Robert H. Nutter	1.2 NAME	
STREET ADDRESS	610 W. AZEEL ST.	1.3 STREET ADDRESS	
CITY-ST-ZIP	Tampa, FL. 33606-2273	1.4 CITY-ST-ZIP	
TITLE	V. President	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Roland A. Rosello	2.2 NAME	
STREET ADDRESS	610 W. AZEEL ST.	2.3 STREET ADDRESS	
CITY-ST-ZIP	Tampa, FL. 33606-2273	2.4 CITY-ST-ZIP	
TITLE	SEC-TREAS.	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Angelo M. Ferlita	3.2 NAME	
STREET ADDRESS	610 AZEEL ST.	3.3 STREET ADDRESS	
CITY-ST-ZIP	Tampa, FL. 33606-2273	3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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 on an attachment with an address.

SIGNATURE \_\_\_\_\_

CR2E034 (4/97)