

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

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1997 FEB 12 AM 8:32

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P96000045624 (9)**

1. Corporation Name  
**FLASH & ASSOC. INC.**

Principal Place of Business  
~~3438 NORTH CARNATION COURT~~  
~~TALLAHASSEE FL 32303~~

Mailing Address  
~~3438 NORTH CARNATION COURT~~  
~~TALLAHASSEE FL 32303-2607~~



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified <b>05/30/1996</b>	3a. Date of Last Report
21. <b>Hwy 20 at corner of Palm Ridge</b>	26. <b>P.O. Box 1150</b>			4. FEI Number <b>59-3382262</b>	Applied For <input type="checkbox"/> Not Applicable
22. Suite, Apt. #, etc.	27. Suite, Apt. #, etc.			5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
23. <b>Bristol, FL</b>	28. <b>Bristol, FL</b>			6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
24. <b>32321</b>	25. <b>USA</b>	29. <b>32321</b>	30. <b>USA</b>	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent <b>MARTIN, MARK T</b> <del>3438 NORTH CARNATION COURT</del> <del>TALLAHASSEE FL 32303</del>		10. Name and Address of New Registered Agent	
		81. Name <b>Scott Taylor</b>	
		82. Street Address (P.O. Box Number is Not Acceptable) <b>1211 Brandt Dr.</b>	
		83.	
		84. City <b>Tallahassee</b>	85. Zip Code <b>FL 32308</b>

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

*Scott Taylor*

(NOTE: Registered Agent signature required when reinstating)

**2-10-97**

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE <b>P</b>	<input type="checkbox"/> DELETE	1.1 TITLE <b>200002085572--0</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME <b>TAYLOR, SCOTT B</b>		1.2 NAME <b>-02/12/97--01095--002</b>	
STREET ADDRESS <b>1211 BRANDT DR.</b>		1.3 STREET ADDRESS <b>****165.00 ****165.00</b>	
CITY-ST-ZIP <b>TALLAHASSEE FL 32308</b>		1.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	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	<input type="checkbox"/> DELETE	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	<input type="checkbox"/> DELETE	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

*Scott Taylor*

**2-10-97**

**(and) 1-12-97**

CR2E034 (9/96)