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.)

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

P96000081807 (5)

DOCUMENT #

1. Corporation Name COOPER & BYRNE, P.A.

Principal Place of Business

Mailing Address

FILED

97 JUL 18 PH 2: 20



SECRETARY OF STATE TALLAHASSEE, FLORIDA



2414 EAST PLAZA DRIVE TALLAHASSEE FL 32308		2414 EAST PLAZA DRIVE TALLAHASSEE FL 32308			DO NOT WRITE	IN THIS SPACE	=
				}	3. Date Incorporated or Qualified	3a. Date of	
					10/03/1996		
2. Principal Pi	lace of Business	2a. Mailing Address	·		4. FEI Number		Applied For
21		26 P.O. Box 13651			59 - 3406 388	F	Not Applicable
Sulte, Apt.	#, etc.	Suite, Apt. #, etc.				□ \$8	.75 Additional
22		27			5. Certificate of Status Desired		ee Required
City & State		City & State			6. Election Campaign Financing	\$!	5.00 May Be
23		28 Tallahassee FL			Trust Fund Contribution		
Zip	Country	Zip	Country		8. This corporation owes or has pai	d the current ye	ear Intangible
24		29 32317-3651	30		Personal Property Tax due June		
g, Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent							
	OPER, CHARLES L JR.		B1 Na	ame			
				82 Street Address (P.O. Box Number is Not Acceptable)			
TALLAHASSEE FL 32308							
			83				
			84 Cit	ity		FL 85	Zip Code
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	Signature, typed or printed name of registered age	int and title if applicable. (NOTE:	Registered Agent sig-	nature required	when reinstating)	DATE	
12.	OFFICERS AN	D DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC	ERS AND DIRE	CTORS IN 12
TITLE	D	☐ DELETE	1.1 TITLE			₽ □ CI	hange Addition
NAME	Byrne, D. Andrew		1.2 NAME			1	Λ
STREET ADDRESS	518 BOBBIN BROOK LANE		1.3 STREET ADDR	RESS	- N	a	′ (
CITY - ST - ZIP	TALLAHASSEE FL 32312		1.4 CITY - ST - ZIP	,		12	,
TITLE	D	☐ DELETE	2.1 THTLE		71-	CI	hange Addition
NAME	COOPER, CHARLES L		2.2 NAME	-			
STREET ADDRESS	821 LAKE RIDGE ROAD		2.3 STREET ADDR	(ESS	5000022	4597	<u>'</u> ,5-,,-9
CITY-ST-ZIP	TALLAHASSEE FL 32312		2. 4 CITY - ST - ZIF	P	-07/23/9	370113	3020
TITLE		☐ DELETE	3.1 TITLE		米米米米] 195		May 65 Unition
NAME			3.2 NAME				
"STREET ADDRESS			3.3 STREET ADDR	RESS			
CITY-ST-ZiP	_		3.4. CITY-ST-ZIP	•			
TITLE		DELETÉ	4.1 TITLE			☐ CI	hange Addition
NAME			4. 2 NAME				+
STREET ADDRESS			4.3 STREET ADDR	RESS			ļ
CITY-ST-ZIP	·		4.4 CITY - ST - ZIP	, [1
TITLE		DELETE	5.1 TITLE			☐ CI	hange Addition
NAME			5.2 NAME				İ
STREET ADDRESS			5.3 STREET ADDA	HESS			
CITY-ST-ZIP			5.4 CITY-ST-ZIP				
TITLE		☐ DELETE	6.1 TIFLE			☐ CI	nange 🔲 Addition
NAME			6.2 NAME	1			İ
STREET ADDRESS			6.3 STREET ADDR	RESS			
CITY-ST-ZIP			6.4 C/TY-ST-ZIP	1			
	u partifuthat the information avantia.	d with this filles stars and smallful			Section 110 07/2V// Floride Statutes	I for the second of	al at at a

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 il/changed, or onyan attachment with an address.

Law Offices

COOPER & BYRNE

JOHN K. BYRNE*

(1930-1994)

D. ANDREW BYRNE † CHARLES L. COOPER, JR.** WILLIAM W. BLUE

† Also Admitted in Tennessee * Admitted in Tennessee Only ** Board Certified in Tax Law a professional association
2414 East Plaza Drive
P.O. Box 13651
Tallahassee, Florida 32317-3651
(904) 671-1111

Fax: 671-2636

WEBSITE: HTTP://www.cooperbyrne.com

July 17, 1997

Florida Department of State Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

Re:

1997 Annual Report

Dear Sir/Madam:

I recently received a 2nd Notice regarding the 1997 corporation annual report.

A check in the amount of \$165.00 payable to Department of State was mailed along with the original annual report on January 6, 1997 (a copy of which is attached). Apparently the check and annual report were lost in the mail. Therefore, I am sending you an original annual report form along with a check in the amount of \$165.00.

Please call me immediately if you need anything else.

Sincerely,

Pamela B. Williams

Panele BWilliams

Office Manager

Enclosures