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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT # P96000097098 (3)

BYINGTON CONSULTING, INC.

Principal Place of Business			Mailing Address					t thattant tie terfe killer abier gallt aanti natia lähit foori datia lähet fori dati			
25101 BAY CEL BONITA SPRIN		25101 BAY CEDAR DR BONITA SPRINGS FL 34134-2950									
								3. Date Incorporated or Qualified 12/02/1996	3a.	Date of Last R	leport
2. Principal P	lace of Business	28.	Mailing Address					4. FEI Number		[A	pplied For
21			26					65-0711427	<i>,</i>	No	ot Applicable
Suite, Apt.	#, etc	27	Suite, Apt. #, etc.					5. Certificate of Status Desired			Additional equired
City & State			City & State				6. Election Campaign Financing		\$5.00	May Be	
23		28						Trust Fund Contribution			to Fees
Zip	Country		Zip	c	ountry	1		8. This corporation has liability for	intangik	ole tax under s	s. 199.032,
24	25	29		30					Yes	≥ No	
	9. Name and Address of Curre	nt Regis	tered Agent					10. Name and Address of New Re	glatere	d Agent	
BYIN	igton, richard p				81	Nam	ne				
25101 BAY CEDAR DR						Stre	et Addres	ss (P.O. Box Number is Not Acceptate	ole)		
BON	IITA SPRINGS FL 34134								· · · · · · · · · · · · · · · · · · ·		
					83						
					84	City			F		Code
11. Pursuant office or r agent. La	to the provisions of Sections 607.05 registered agent, or both, in the State am familiar with, and accept the oblig	02 and 6 e of Florid gations of	07.1508, Florida Statu da. Such change was f, Section 607.0505, F	utes, the authori: lorida S	abovi zed by statutes	e-name the c	ied corpor corporation	ration submits this statement for the p n's board of directors. I hereby accep	ourpose of the a	of changing in pointment as	ts registered registered
SIGNATURE	Signature typed or printed name of registered ag	and and all-	U and a Eli	NT. El-1-1		-1		when reinstating)	DATE		
12.	OFFICERS AN			JIE: Hegisti		aru signar	mue required	ADDITIONS/CHANGES TO OFFIC			RS IN 12
TILE	D	TE DITE	DELETE		TITLE		1	ADDITIONO OF INVALED TO OFFICE	20101	Change	Addition
NAME	BYINGTON, RICHARD P				2 NAME		-				
STHEET ADDRESS	25101 BAY CEDAR DR					ADDRES	ee l				
CHY-ST-ZIP	BONITA SPRINGS FL 34134				CITY-S		~				
THLE	Dominion vintos (2 otto)		DELETE		TITLE	1-411	 			Change	Addition
NAME	{			- 1	NAME		ĺ	•••		_ *	
STREET ADDRESS				23	STREET	ADDRES	22				
CITY-ST-74P	}				4 CITY-S		-				
1/TLE			DELETE		TITLE	31 2.11				Change	Addition
NAME					2 NAME					5	-
STREET ADDRESS				3.1	3 STREET	ADDRES	ss				
CITY - ST - 71P				•	1. CITY-S		1		+		
TITLE			DELETE		TITLE	<u> </u>	_	·····		☐ Change	Addition
NAMÉ				4.	2 NAME		i			•	
STREET ADDRESS	}			4.3	STREET	ADDRES	ss				
CiTY-S∓-ZiP	1			4.4	4 CITY - S	T-ZIP	1				
TITLE			DELETE		TITLE					☐ Change	Addition
NAME :	1			5.2	NAME		ł				
STREET ADDRESS			1	53	STREFT	ADDRES	ss				
CHTY-ST-ZIP				1	CITY-S						
TITLE	<u> </u>		DELETE		TITLE			······································		☐ Change	Addition
NAME				•	2 NAME			•		-	
STREET ADDRESS						ADDRES	ss				

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:

CITY - ST - 74P

FILED

Apr 08 1997 8:00am

Secretary of State