

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

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
98 APR 27 AM 10:38

PROFIT CORPORATION
ANNUAL REPORT
1998

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



DOCUMENT # P96000097690 (7)

1. Corporation Name

DUANE E. THOMAS, P.A.

(Name changed)

Thomas & McRae P.A.

Principal Place of Business

204 SOUTH MARION STREET
LAKE CITY FL 32056

Mailing Address

POST OFFICE BOX 2137
LAKE CITY FL 32056

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address
21 204 S. marion st.	26 P.O. Box 2137
Suite, Apt. #, etc.	Suite, Apt. #, etc.
22	27
City & State	City & State
23 Lake City, Fla	28 Lake City, FL
Zip	Zip
24 32025	29 32056
Country	Country
25 USA	30 USA

3. Date Incorporated or Qualified

11/20/1996

4. FEI Number

30-3414301

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 owes or has paid the current year Intangible
Personal Property Tax due June 30.

☒ Yes ☐ No

9. Name and Address of Current Registered Agent

THOMAS, DUANE E
204 SOUTH MARION STREET
LAKE CITY FL 32056

10. Name and Address of New-Registered Agent

81 Name

Duane E. Thomas

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

204 S. marion st.

83

84 City

Lake City

FL

85 Zip Code

32025

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 am familiar with, and accept the provisions of Section 607.0505, Florida Statutes.

SIGNATURE

Duane E. Thomas

Signature of person or persons authorized to sign this report

(NOTE: Registered Agent signature required when reinstating)

DAY

3/5/98

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	Director/President	1.1 TITLE	☐ Change ☐ Addition
NAME	THOMAS, DUANE E	1.2 NAME	
STREET ADDRESS	204 SOUTH MARION STREET	1.3 STREET ADDRESS	200002515742--3
CITY-ST-ZIP	LAKE CITY FL 32056-25	1.4 CITY-ST-ZIP	-05/07/98--01098--001
TITLE	VLO	2.1 TITLE	****150.00 ☐ Change ☐ Addition
NAME	T. Bradley McRae	2.2 NAME	
STREET ADDRESS	204 S. marion St.	2.3 STREET ADDRESS	
CITY-ST-ZIP	Lake City, FL 32025	2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I 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, or changed, or on an attachment with an address.

3/5/98

3/5/98 (904) 755-5814

CR2E034 (10/97)