PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

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

FILED Apr 23 1997 8:00am Secretary of State

1997		DIVISION	DIVISION OF		
DOCUMENT #	P9600010320	01 (5)		

1. Corporation		` '			}			
ROY W.	FOXALL, P.A.							
							ולולל עונו לונונ	(M) (M)
Principal Plac	e of Business	Mailing Address			{			
STE. 409, 12730	O NEW BRITTANY BLVD.	STE. 409, 12730 NEW BRITT	ANY BLVD	.				
FT. MYERS FL	33907	FT. MYERS FL 33907-3646						
					3. Date Incorporated or Qualified	3a. Da	ate of Last Re	aport
					12/19/1996		I/A	
	lace of Business	2a. Mailing Address			4. FEI Number 20093			plied For
Suite, Apt.	myers, F L	26 /2730 Suite, Apt. #, etc.	···		GS-0720093			t Applicable
	4, etc. 9	27 40 9			5. Certificate of Status Desired		\$8.75 A	
City & Stat		City & State	1	<u> </u>	6. Election Campaign Financing		\$5.00	May Be
23 F7			rer		Trust Fund Contribution		Added t	
Zip 339	ور ما رود کا کا ک	Zip ~ 4947	Count)SA	8. This corporation has liability for			199.032,
24 339	9. Name and Address of Currel		30 6	<u>'3" </u>	Florida Statutes 10. Name and Address of New R	Yes (
FOX	ALL, ROY W	it trafficiolog Agon	8	1 Name	IC. STATES AND PROPERTY OF THE REST	9.510.00		
	409, 12730 NEW BRITTANY BL	VD.	8	2 Street Artrir	ess (P.O. Box Number Is Not Accepta	ble)		
	MYERS FL 33907			Olicel Modi		10107		
			8	3				
			B	4 City			85 Zip (Code
44 5	4.0-4.0-07.05	00 007 1500 Florida Otal 1-				FL		
office or i	to the provisions of Sections 607.050 registered agent, or both, in the State	12 and 607,1508, Florida Statute of Elorida. Such change was a	s, the abo uthorized	ve-named corp by the corporat	poration submits this statement for the lion's board of directors. I hereby acce	purpose of optithe app	i changing iti piritment as	s registered registered
agent. Fa	im familiar with and accept the oblig	ations of, Section 607.0505, Flor	rida Statut	es.	V	110	19)	
SIGNATURE	Stgnature, typen or printer name of registered ag	ont and little it applicable. (NOTE	Registered A	gent signature requir	red when reinstating)	DATE		
12.	OFFICERS AN	D DIRECTORS	13.		ADDITIONS/CHANGES TO OFF	CERS AND	DIRECTOR	S IN 12
TITLE	DPST	☐ DELETE	1.1 TITLE				Change	Addition Addition
NAME	FOXALL, ROY W		1.2 NAM!	E				
STHEET ADDRESS	STE. 409, 12730 NEW BRITTA	ny Blvd.	1.3 STRE	ET ADDRESS				
CITY-ST-ZIP	FT. MYERS FL 33907	D DELETE	1.4 CITY				TT Channe	Addison
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STREET ADDRESS								
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CITY-ST-ZIP				-ST-ZIP				
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NAME			4. 2 NAM	IE				
STREET ADDRESS			4.3 STRE	ET ADORESS				
CITY - ST - ZIP			4.4 CITY	-ST-ZIP				
TITLE		☐ DELETE	5.1 TITLE				[_] Change	Addition
NAME			5.2 NAM	E				
STREET ADDRESS			5.3 STRE	ET ADDRESS				
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TITLE		☐ DELETE	6.1 TITLE	i			Change	L Addition
NAME			6.2 NAM					
STREET ADDRESS				ET ADORESS				
CITY - ST - ZIP	hu and if that the information appelle	al colon state & time along and a constitution		-\$T-ZIP	in Castian 110 07/2Vi). Elevido Ctatul	as 14 who	- nestification	th o

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 reserved or ustee 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 will an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

4/18/97 (941)9

Daytime Phone # 0000092