

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # S02490 (8)

1. Corporation Name

SWANN AND ASSOCIATES, P.A.

Principal Place of Business

1031 W MORSE BLVD
SUITE 270
WINTER PARK FL 32789
US

Mailing Address

1031 W MORSE BLVD
SUITE 270
WINTER PARK FL 32789
US



2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

3. Date Incorporated or Qualified

09/25/1990

3a. Date of Last Report

03/02/1995

4. FEI Number

59-3029017

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 has liability for intangible tax under s. 199.032,
Florida Statutes

☒ Yes

☐ No

9. Name and Address of Current Registered Agent

SWANN, RICHARD R.
1031 W MORSE BLVD
SUITE 270
WINTER PARK 32789

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

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 607.0504, Florida Statutes.

SIGNATURE

Dorothy Swann

(Print) Registered Agent Signature (Must be legible)

DATE

12. OFFICERS AND DIRECTORS

TITLE

PD
MCAULIFFE, DOROTHY SWANN
616 A STREET, S.E.
WASHINGTON DC

☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

ST
BROWN, KAREN M.
1031 WEST MORSE BLVD.
WINTER PARK FL

☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

VST
ABNER, SHARON B.
1031 WEST MORSE BLVD.
WINTER PARK FL

☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

VP

☐ Change

☒ Addition

1.2 NAME

Swann, Richard R.

1.3 STREET ADDRESS

1031 W. Morse Blvd., Suite 270
Winter Park, FL 32789

1.4 CITY - ST - ZIP

2.1 TITLE

PD

☒ Change

☐ Addition

2.2 NAME

McAuliffe, Dorothy Swann

2.3 STREET ADDRESS

c/o 1031 W. Morse Blvd., Suite 270
Winter Park, FL 32789

2.4 CITY - ST - ZIP

3.1 TITLE

☐ Change

☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE

☐ Change

☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE

☐ Change

☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

☐ Change

☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

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***200.00

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

Dorothy Swann
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-23-96

(703) 749-9383

Daytime Phone #

CR2E034 (12/95)