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

PROFIT CORPORATION ANNUAL REPORT



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

1996

DOCUMENT # 1. Corporation Name S24022

(3)

RICHAR	D G. ULRICH, P.A.							
Principal Place	of Business	Mailing Addi	ess					DIGII 818H 189)
100 2ND AVE.	\$0 .	100 2ND A	VE. \$0.					
SUITE 606		SUITE 606						
ST PETERSBURG FL 33701		ST PETERSBURG FL 33701				3. Date Incorporated or Qualified 01/05/1991	3a. Date of Last R	
2. Principal Pla	aco of Pusiness	2a, Mailing A	eletenna			4. FEI Number	03/17/199	
21	ace or business	26 Walling A	KIO1622			65-0232042	├ - -	Applied For Not Applicable
Suite Apt	#. etc.	Suite, Ap	ot. #. etc			· · · · · · · · · · · · · · · · · · ·		5 Additional
22		27	t — 1			5. Certificate of Status Desired	1 1 '	Required
City & State)	City & St	ate			6. Election Campaign Financing	\$5.0	0 May Be
23		28				Trust Fund Contribution	1 1 7	ed to Fees
Ζιρ	Country		Country		8. This corporation has liability for intangible tax under s. 199.032,			
24	25	29	30				□No	
<u> </u>	9. Name and Address of Curre	nt Registered Ag	ent			10. Name and Address of New R	egistered Agent	
01101114	N 7101140 B			81	Name			
Cushman, Thomas R 696 First Ave N				82	Street Addre	ess (P.O. Box Number is Not Acceptab	le)	
				83		· · · · · · · · · · · · · · · · · · ·		
SUITE 20				63				
SIPEIE	RSBURG FL 33701			84	City		85 Zi	ip Code
11 Purcuantt	o the provisions of Sections 607 050	2 and 607 1508 F	lorida Statutae, tuo	above	namori coroor	ation submits this statement for the pur	FL 63 2	registered office
or register	ed agent, or both, in the State of Flor	ida. Such change v	was authorized by	the corp	oration's boar	d of directors. Thereby accept the appo	ointment as registered	d agent. I am
	h, and accept the obligations of, Sec	alion 607.0505, Nor	nda Statutes.					
SIGNATURE _	Signature, typad or printed han e of registere i age:	Land Office as picaceo	(NOTE Box	ctered A.F.	Lsignature reguired	Twhen renstative)	DA*F	
12.		ND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFI	CERS AND DIRECTO	ORS IN 12
TITLE	DPST		DELETE	1 1 TITLE	···		Change	Addition
NAME	Ulrich, richard G.			1.2 NAME				
STREET ADORESS	100 2ND AVENUE SO., SUIT	E 606		1 3 STREET	ADDRESS			
CITY - ST - ZIP	ST PETERSBURG FL			1.4 C!TY - 9	T-21P			
TITLE			DELETE	2 1 TiTLE			☐ Change	Addition
NAME				2 2 NAME				
STREET ADDRESS				23 STREET	ADDRESS			
CHTY - ST - ZIP				2.4 CiTY - S	T - ZIP			
THILE		L		3 1 TITLE			☐ Change	☐ Addition
NAME				3 2 NAME				
STREET ADDRESS				33 STREE				
CITY-ST-ZIP TITLE				3.4 CITY - S 4. 1 TITLE	T-ZIP		☐ Criange	Addition
		LJ					☐ Change	Addition
NAME CARCEY ADODESE				4.2 NAME	*France			
STREET ADDRESS				4.3 STREE1				
CITY - ST - ZIP TITLE				440 TY - S 5 1 T TLE			☐ Change	☐ Addition
NAME		L		5.2 NAME				
STREET ADDRESS				53 STREET	ADDRESS			
CHTY - ST - ZIP				5 4 C/TY-9	i			
TITLE	e name annotation of the second as a second control of the second		05.555	6 1 T TLE	. Lu		[□ Change	Addition
NAME				6 2 NAME				
STREET ADDRESS				6 3 STREET	ADDRESS			
CITY-ST-ZIP				6.4 CITY - 9				
	v certify that the information supplied	with this filmous vic				or the exemption stated in Section 119	07(3)(k) Florida Status	toe I further

To 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: ___

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR