FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

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

DOCUMENT # **S24148** **(6)**

1. Corporation Name

DANIEL R. LOZIER, P.A.

Principal Place of Business

125 W ROMANA ST
ONE PENSACOLA PLZ. S222
PENSACOLA FL 32501
US

Mailing Address

125 W ROMANA ST
ONE PENSACOLA PLZ. S222
PENSACOLA FL 32501
US

2. Principal Place of Business
21 Street Address
22
23 City & State
24 Zip 25 County

2a. Mailing Address
26 Street Address
27
28 City & State
29 Zip 30 County

3. Date Incorporated or Qualified: 12/19/1990

3a. Date of Last Report: 01/19/1995

4. FEI Number: 59-3044164 ☐ 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

~~LOZIER, DANIEL R.~~
~~2121 CURRY CIRCLE~~
~~PENSACOLA FL 32504~~

10. Name and Address of New Registered Agent

81 Name: same
82 Street Address (P.O. Box Number is Not Acceptable): 6670 Martin Rd.
83
84 City: Milton Fla. FL 85 Zip Code: 32570

11. Pursuant to the provisions of Section 607.0502 or 617.0502, 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 607.0505, Florida Statutes.

SIGNATURE:

12. OFFICERS AND DIRECTORS

D
LOZIER, DANIEL R.
~~2121 CURRY CIRCLE~~ 6670 Martin Rd
~~PENSACOLA FL~~ Milton Fl 32570

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

14. I hereby certify that the information supplied with this report is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this 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 attached amendment, if applicable.

SIGNATURE: Daniel R. Lozier Daniel R. Lozier 1/15/96 904 469-9666

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (12/95)