

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

FILED

Feb 07 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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 32501-5847
US



| | |
|---|--|
| 3. Date Incorporated or Qualified 12/19/1990 | 3a. Date of Last Report 01/24/1996 |
| 4. FEI Number 59-3044164 | Applied For <input type="checkbox"/> Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |
| 6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> | \$5.00 May Be Added to Fees |
| 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No | |

2. Principal Place of Business

21 125 W. Romana St.

Suite, Apt. #, etc.

22 Suite 224

City & State

23 Pensacola, FL

Zip

24 32501

Country

25 USA

2a. Mailing Address

26 125 W. Romana St.

Suite, Apt. #, etc.

27 Suite 224

City & State

28 Pensacola, FL

Zip

29 32501

Country

30 USA

9. Name and Address of Current Registered Agent

LOZIER, DANIEL R.
6670 MARTIN RD.
MILTON FL 32570

10. Name and Address of New Registered Agent

81 Name

Lozier, Daniel R.

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

5451 Creek View Lane

83

84 City

Pace

FL

85

Zip Code

32571

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 607.0505, Florida Statutes.

SIGNATURE

Daniel R. Lozier
Signature, typed or printed name of registered agent and the applicant

Daniel R. Lozier
(NOTE: Registered Agent signature required when reinstating)

1/31/97
DATE

12. OFFICERS AND DIRECTORS

TITLE D
NAME LOZIER, DANIEL R.
STREET ADDRESS 6670 MARTIN RD.
CITY-ST-ZIP MILTON FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D
1.2 NAME Lozier, Daniel R.
1.3 STREET ADDRESS 5451 Creek View Lane
1.4 CITY-ST-ZIP Pace, FL 32571

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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 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:

Daniel R. Lozier
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daniel R. Lozier
President

1/31/97

904
469 9666
Daytime Phone #

CR2E034 (9/96)