

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 # **S37518** (5)

1. Corporation Name

JOHN W. FIELD, P.A.



Principal Place of Business

Mailing Address

**316 NW 37TH WAY
SUITE 72
DEERFIELD BEACH FL 33442
US**

**316 NW 37TH WAY
DEERFIELD BEACH FL 33442
US**

3. Date Incorporated or Qualified
03/13/1991

3a. Date of Last Report
07/27/1995

2. Principal Place of Business

2a. Mailing Address

21 **461 E. HILLSBORO BLVD**

26 **SAME**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 **Sic. 100**

27

City & State

City & State

23 **DEERFIELD BEACH, FL**

28

Zip

Country

Zip

Country

24 **33441**

25 **U.S.**

29

30

4. FEI Number

65-0250363

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

10. Name and Address of New Registered Agent

**FIELD, JOHN W.
316 NW 37TH WAY
DEERFIELD BEACH FL 33442**

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 607.0505, Florida Statutes.

SIGNATURE

Signature of Registered Agent (if registered agent is not the corporation)

Signature of President (if registered agent is the corporation)

DATE

8/6/96

12. OFFICERS AND DIRECTORS

13. ADDITION/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

NAME **FIELD, JOHN W**
STREET ADDRESS **316 NW 37TH WAY**
CITY-ST-ZIP **DEERFIELD BEACH FL**

TITLE ☐ DELETE

NAME **D FIELD, JOHN W**
STREET ADDRESS **316 NW 37TH WAY**
CITY-ST-ZIP **DEERFIELD BEACH FL**

TITLE ☐ DELETE

NAME
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TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

1. TITLE

12 NAME

13 STREET ADDRESS

14 CITY-ST-ZIP

2. TITLE

22 NAME

23 STREET ADDRESS

24 CITY-ST-ZIP

3. TITLE

32 NAME

33 STREET ADDRESS

34 CITY-ST-ZIP

4. TITLE

42 NAME

43 STREET ADDRESS

44 CITY-ST-ZIP

5. TITLE

52 NAME

53 STREET ADDRESS

54 CITY-ST-ZIP

6. TITLE

62 NAME

63 STREET ADDRESS

64 CITY-ST-ZIP

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, on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPE OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/6/96

954-725-0207

CR2E034 (12/95)