

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 # S50875 (1)

1. Corporation Name

EVANS & DONICA, P.A.



Principal Place of Business

201 EAST KENNEDY BLVD.
SUITE 1500
TAMPA FL 33602

Mailing Address

201 EAST KENNEDY BLVD.
SUITE 1500
TAMPA FL 33602

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
05/06/1991

3a. Date of Last Report
06/05/1995

4. FEI Number

59-3063692

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

EVANS, NOEL K.
201 EAST KENNEDY BLVD.
SUITE 1500
TAMPA FL 33602

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 607.1503, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, 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, hand or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

Feb 20, 1996

12. OFFICERS AND DIRECTORS

1.1 TITLE ☐ DELETE

NAME
PD
EVANS, NOEL K.
3172 WESSEX WAY
CLEARWATER FL

1.2 NAME ☐ DELETE

NAME
SD
DONICA, HERBERT R.
112 BISCAYNE AVENUE
TAMPA FL

1.3 NAME ☐ DELETE

1.4 NAME

1.5 NAME

1.6 NAME

1.7 NAME

1.8 NAME

1.9 NAME

1.10 NAME

1.11 NAME

1.12 NAME

1.13 NAME

1.14 NAME

1.15 NAME

1.16 NAME

1.17 NAME

1.18 NAME

1.19 NAME

1.20 NAME

1.21 NAME

1.22 NAME

1.23 NAME

1.24 NAME

1.25 NAME

1.26 NAME

1.27 NAME

1.28 NAME

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

10121 Woodson Way
Tampa, FL 33618

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

632 Lugen
Tampa, FL 33606

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 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

Feb 20, 1996 813221-1996

Date

Daytime Phone #

CR2E034 (12/95)