

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 # **S69652** (3)

1. Corporation Name

**MCGUIRE, PRATT, MASIO & FARRANCE, P.A.**



Principal Place of Business

**1001-3RD AVENUE WEST  
SUITE 600  
BRADENTON FL 34205**

Mailing Address

**1001-3RD AVENUE WEST  
SUITE 600  
BRADENTON FL 34205**

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  
**07/25/1991**

3a. Date of Last Report  
**04/20/1995**

4. FEI Number  
**59-3077708**

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

**PRATT, CHARLES J., JR, ESQUIRE  
1001-3RD AVENUE WEST  
SUITE 600  
BRADENTON FL 34205**

10. Name and Address of New Registered Agent

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 607.0507 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, typed or printed name of person filing this statement

(If 20th Registered Agent Signature required, attach herewith)

DATE

OFFICERS AND DIRECTORS

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE  
NAME **DP**  
STREET ADDRESS **MCGUIRE, HUGH E JR**  
CITY-ST-ZIP **1001 THIRD AVE W STE 600  
BRADENTON FL**

TITLE ☐ DELETE  
NAME **DVT**  
STREET ADDRESS **PRATT, CHARLES J JR**  
CITY-ST-ZIP **1001 THIRD AVE W STE 600  
BRADENTON FL**

TITLE ☐ DELETE  
NAME **DS**  
STREET ADDRESS **MASIO, CAROL A**  
CITY-ST-ZIP **1001 THIRD AVE W STE 600  
BRADENTON FL**

TITLE ☐ DELETE  
NAME **S**  
STREET ADDRESS **FARRANCE, ROBERT A**  
CITY-ST-ZIP **1001 3RD AVE WEST  
BRADENTON FL**

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ☐ Change ☐ Addition

11 TITLE  
12 NAME  
13 STREET ADDRESS  
14 CITY-ST-ZIP

21 TITLE  
22 NAME  
23 STREET ADDRESS  
24 CITY-ST-ZIP

31 TITLE ☐ Change ☐ Addition  
32 NAME  
33 STREET ADDRESS  
34 CITY-ST-ZIP

41 TITLE ☐ Change ☐ Addition  
42 NAME  
43 STREET ADDRESS  
44 CITY-ST-ZIP

51 TITLE ☐ Change ☐ Addition  
52 NAME  
53 STREET ADDRESS  
54 CITY-ST-ZIP

61 TITLE ☐ Change ☐ Addition  
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, or on an attached sheet with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**7-22-96 941/748 2076**

CR2E034 (12/95)