SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.) **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham **ANNUAL REPORT** Secretary of State 1996 DIVISION OF CORPORATIONS DOCUMENT # (9) REGULATORY CONSULTANTS, INC. Principal Place of Business Mainna Address 401 INTERSTATE BLVD 401 INTERSTATE BLVD SARASOTA FL 34240 SARASOTA FL 34240 3. Date Incorporated or Qualified 3a. Date of Last Report 09/01/1991 05/01/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 65-0280795 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zip Country Zφ Country 8. This corporation has tiability for intangible tax under s. 199 032 24 25 29 30 Yes 🗌 No Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name MACFARLANE, GEORGE C. **401 INTERSTATE BLVD** 82 Street Address (P.O. Box Number is Not Acceptable) SARASOTA FL 34240 83 84 City 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, type flor printed basis of regulated agent and the it applicable [DOTE: Registered Agent signature required when reinstating). 12 OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (36/8)TITLE DELETE 1: 10:08 Change Addition NAME MACFARLANE, GEORGE C. 1.2 NAME CR2E034 STREET ADDRESS **401 INTERSTATE BLVD** 1.3 STREET ADDRESS SARASOTA FL CITY-ST-ZIP 1 4 CITY - ST - 7IP TITLE DELETE 21 TITLE Change Addition NAME MACFARLANE, GEORGE C. 2.2 NAME **401 INTERSTATE BLVD** STREET ADDRESS 2.3 STREET ADDRESS SARASOTA FL CITY - ST - ZIP 2 4 CHY - ST - ZIP TITLE DELETE 3 1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-7IP 34 CITY-ST-ZIP TITLE DELETÉ 4 1 TiTLE Change ____ Addition NAME 4.2 NAME STREET ADDRESS 4 3 STREET ADDRESS CITY-ST-ZIP 4 4 CITY - ST - ZIP TITLE DELETE 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5 4 CITY - ST - 7IP TITLE DELETE 6 1 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS **6.3 STREET ADDRESS** CITY-ST-ZIP 64 CHY - 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 1 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 617, Florida Statutes and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address

Pres. Dest