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Apr 30 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 # S94887 (4)  
1. Corporation Name  
HAMIC & SHIVERS, PROFESSIONAL ASSOCIATION, CERTIFIED PUBLIC ACCOUNTANTS



Principal Place of Business Mailing Address  
201 S. FLORIDA AVE. 201 S. FLORIDA AVE.  
LAKELAND FL LAKELAND FL 33801-4621

3. Date Incorporated or Qualified 11/18/1991 3a. Date of Last Report 08/08/1996  
4. FEI Number 59-3094420 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

2. Principal Place of Business 2a. Mailing Address  
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.  
22 City & State 27 City & State  
23 Zip Country 28 Zip Country  
24 25 29 30

9. Name and Address of Current Registered Agent  
HAMIC, JOHN W.  
201 S. FLORIDA AVE.  
LAKELAND FL 33802

10. Name and Address of New Registered Agent  
81 Name JEFFREY S. SHIVERS  
82 Street Address (P.O. Box Number is Not Acceptable) 201 SOUTH FLORIDA AVENUE  
83  
84 City LAKELAND FL 85 Zip Code 33801

11. Pursuant to the provisions of Sections 607.0502 and 607.0508, 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] DATE: 4/24/97

Table with 2 columns: 12. OFFICERS AND DIRECTORS, 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. Rows include HAMIC, JOHN W. and SHIVERS, JEFFREY S.

Table with 2 columns: 12. OFFICERS AND DIRECTORS, 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. Rows include SHIVERS, JEFFREY S. and empty rows.

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, in an attachment with an address.

SIGNATURE: [Signature] DATE: 4/24/97

CR2E034 (9/96)