

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortman  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # **S96491**

(3)

1. Corporation Name

**SWEENEY & COMPANY, P.A.**

Principal Place of Business

**2600 E. COMMERCIAL BLVD.  
SUITE 201A  
FT. LAUDERDALE FL 33308**

Mailing Address

**2600 E. COMMERCIAL BLVD.  
SUITE 201A  
FT. LAUDERDALE FL 33308**



2. Principal Place of Business

2a. Mailing Address

21

26

State, Apt. #, etc.

State, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

**11/25/1991**

3a. Date of Last Report

**04/28/1995**

4. FCI Number

**65-0296207**

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

10. Name and Address of New Registered Agent

**SWEENEY, HARRY D.  
2600 E. COMMERCIAL BLVD.  
SUITE 201  
FT LAUDERDALE FL 33308**

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 607.1505, 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 obligation of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature of Registered Agent (Print Name and Title)

Signature of Registered Agent (Print Name and Title)

DATE

12. OFFICERS AND DIRECTORS

1. NAME  
2. STREET ADDRESS  
3. CITY, STATE, ZIP  
4. NAME  
5. STREET ADDRESS  
6. CITY, STATE, ZIP  
7. NAME  
8. STREET ADDRESS  
9. CITY, STATE, ZIP  
10. NAME  
11. STREET ADDRESS  
12. CITY, STATE, ZIP  
13. NAME  
14. STREET ADDRESS  
15. CITY, STATE, ZIP  
16. NAME  
17. STREET ADDRESS  
18. CITY, STATE, ZIP  
19. NAME  
20. STREET ADDRESS  
21. CITY, STATE, ZIP  
22. NAME  
23. STREET ADDRESS  
24. CITY, STATE, ZIP  
25. NAME  
26. STREET ADDRESS  
27. CITY, STATE, ZIP  
28. NAME  
29. STREET ADDRESS  
30. CITY, STATE, ZIP

**D  
SWEENEY, HARRY D.  
3010 N.E. 57TH ST.  
FT. LAUDERDALE FL**

☐ DELETE

**D  
WICHROWSKI, MARK V.  
11235 N.W. 12TH COURT  
CORAL SPRINGS FL**

☐ DELETE

☐ DELETE

☐ DELETE

☐ DELETE

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

14. I hereby certify that the information supplied in 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. I am an officer or director of the corporation or the registered or trustee or authorized to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed from an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/21/96

854-776-2000

CR2E034 (12/95)