

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Jan 30 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # S98715 (3)

1. Corporation Name

ROSS & WILLIAMS, P.A. ROSS, WILLIAMS & VECCHIO, P.A.



Principal Place of Business

Mailing Address

230 S. FLORIDA AVENUE
SUITE 501
LAKELAND FL 33801
US

230 S. FLORIDA AVENUE
SUITE 501
LAKELAND FL 33801
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/04/1991

4. FEI Number

59-3094798

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 owes or has paid the current year Intangible
Personal Property Tax due June 30.

☒ Yes ☐ No

2. Principal Place of Business

21 3308 CLEVELAND HGTS. BLVD.

Suite, Apt. #, etc.

2a. Mailing Address

27 Suite, Apt. #, etc.

City & State

23 LAKELAND, FLA.

City & State

28

Zip

24 33803

Country

25 USA

Zip

29

Country

30

9. Name and Address of Current Registered Agent

ROSS, DENNIS A.
230 S. FLORIDA AVE SUITE 501
LAKELAND FL 33803

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

3308 CLEVELAND HGTS. BLVD.

83

84 City

LAKELAND

FL

85 Zip Code

33803

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

1/19/98

DATE

OFFICERS AND DIRECTORS

12. ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DPT
ROSS, DENNIS A
230 S. FLORIDA AVENUE, SUITE 501
LAKELAND FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP
DS
WILLIAMS, DAVID J
715 WEDGEWOOD LANE
LAKELAND FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☒ Change ☐ Addition

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
3308 CLEVELAND HGTS. BLVD.
LAKELAND, FLA. 33803

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
3308 CLEVELAND HGTS. BLVD.
LAKELAND, FLA. 33803

3.1 TITLE ☐ Change ☒ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP
D
THOMAS P. VECCHIO
3308 CLEVELAND HGTS. BLVD.
LAKELAND, FLA. 33803

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP
800002417208
-01/30/98--01051--012
***150.00

14. I 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, or on an attachment with an address.

SIGNATURE:

1/19/98

941-701-2100

CR2E034 (10/97)