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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Montanari
Secretary of State
TALLAHASSEE, FLORIDA 32304-0001

DOCUMENT # **V07941** (0)
To: Corporation Name
G.R. POWELL & ASSOCIATES, P.A.

Principal Place of Business
**1010 HENDRICKS-
SUITE 3-
JACKSONVILLE FL 32207**

Mailing Address
**P.O. BOX 6801
JACKSONVILLE FL 32236
US**

2. Principal Place of Business
21 **2253 Cassat Ave**
Suite Apt # etc
22
City & State
23 **Jacksonville, Florida**
ZIP
24 **32210** 25 **USA**

26. Mailing Address
26
Suite Apt # etc
27
City & State
28
ZIP
29
30

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
01/17/1992

3a. Date of Last Report
09/02/1994

4. FEI Number
59-3023439

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
**POWELL, GUY R.
1301 GULF LIFE DRIVE-
SUITE 2501
JACKSONVILLE FL 32207**

10. Name and Address of New Registered Agent
B1 Name
B2 Street Address (P.O. Box Number is Not Acceptable)
2253 Cassat Ave
B3
B4 City **Jacksonville** FL B5 Zip Code **32210**

11. Pursuant to the provisions of Sections 607.01(2) and 607.15(8) 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 607.01(2), Florida Statutes.

SIGNATURE _____

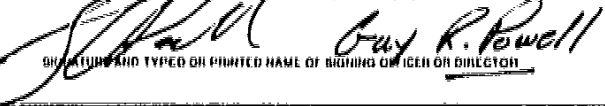
12. OFFICERS AND DIRECTORS

12.1 NAME	D POWELL, GUY RICHARD
12.2 STREET ADDRESS	1301 GULF LIFE DR #2501
12.3 CITY & STATE	JACKSONVILLE FL
12.4 NAME	
12.5 STREET ADDRESS	
12.6 CITY & STATE	
12.7 NAME	
12.8 STREET ADDRESS	
12.9 CITY & STATE	
12.10 NAME	
12.11 STREET ADDRESS	
12.12 CITY & STATE	

13. ADDITIONS CHANGES TO OFFICERS AND DIRECTORS IN 12

13.1 NAME		☐ Change ☐ Addition
13.2 STREET ADDRESS	2253 Cassat Ave	
13.3 CITY & STATE	Jacksonville, FL 32210	
13.4 NAME		☐ Change ☐ Addition
13.5 STREET ADDRESS		
13.6 CITY & STATE		
13.7 NAME		☐ Change ☐ Addition
13.8 STREET ADDRESS		
13.9 CITY & STATE		
13.10 NAME		☐ Change ☐ Addition
13.11 STREET ADDRESS		
13.12 CITY & STATE		

14. I hereby certify that the information supplied with this form is voluntarily furnished and does not qualify for the exemption stated in Sections 199.031 thru 199.034, 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 serve the same as a officer and make under oath that I am an officer or director of this corporation or the receiver or liquidator empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of this form, or a certain attachment with an addition.

SIGNATURE:  **Guy R. Powell**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-28-95 (904) 389-0111
TALLAHASSEE, FLORIDA