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Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # V07979

(0)

1. Corporation Name SANDRA W. JOHNSON, P.A.



Principal Place of Business 2263 ST JOHNS AVENUE SUITE 1 JACKSONVILLE FL 32204 US

Mailing Address 2263 ST JOHNS AVENUE SUITE 1 JACKSONVILLE FL 32204-4621 US

3. Date Incorporated or Qualified 01/21/1992 3a. Date of Last Report 02/15/1996 4. FEI Number 59-3101273 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 [X] 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

10. Name and Address of New Registered Agent

JOHNSON, SANDRA W. 2263 ST JOHNS AVENUE SUITE 1 JACKSONVILLE FL 32204

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 607.1508, 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 type or procedure name of registered agent (if applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

Table with 5 rows for officers and directors. Each row includes Title, Name, Street Address, and City-St-Zip. The first row is for Sandra W. Johnson, P.A. with a 'D' in the title field and a 'DELETE' checkbox.

Table with 5 rows for additions/changes to officers and directors. Each row includes Title, Name, Street Address, and City-St-Zip. Includes checkboxes for 'Change' and 'Addition'.

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, or on an attachment with an address.

SIGNATURE: Sandra W. Johnson

10/31/96 904-381-9300

CR2E034 (9/96)