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

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

**DOCUMENT # V18121** 

(6)

## PROFESSIONAL CONSULTANTS GUILD OF AMERICA, INC.

Principal Place of Business Mailing Address 255 SOUTH ORANGE AVE. 255 SOUTH ORANGE AVE. SIXTH FLOOR **SIXTH FLOOR** ORLANDO FL 32801-3445 ORLANDO FL 32801 3. Date Incorporated or Qualified 3a. Date of Last Report 03/02/1992 04/18/1996 2a. Mailing Address 2. Principal Place of Business Applied For 26 59-3108091 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Country Zip Country Zip 8. This corporation has liability for intaggible tax under s. 199.032, Yes No 25 29 30 Florida Statutes 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 61 Name PINO, LAURENCE J. 255 SOUTH ORANGE AVE. 82 Street Address (P.O. Box Number is Not Acceptable) **6TH FLOOR** 63 ORLANDO FL 32801 84 City 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 of or printed hand of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. (96/6) DELETE Change Addition THLE 1.1 TITLE PINO, LAURENCE J. 1.2 NAME NAME 255 S. ORANGE AVE., 6TH FLOOR STREET ADDRESS 1.3 STREET ADDRESS ORLANDO FL 32801 1.4 CITY - ST - ZIP CITY - ST - ZIP DELETE Change Addition 21 TITLE TITLE WILSON, PATRICIA T 2.2 NAME NAME 255 S. ORANGE AVE., 6TH FLOOR STREET ADDRESS 2.3 STREET ADDRESS ORLANDO FL 32801 2.4 CITY-ST-ZIP CHY-ST-ZIE TITLE DELEYE 31 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3 3 STREET ADDRESS CHTY - ST - 7IP 3.4. CITY-ST-ZIP

64 CiTY+ST-ZiP 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 same legal effect as if made under coll 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 Lam an officer or director of the corporation of the eceiver 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 on an attachment with an address. appears in Block 12 or Block 13 if changed

4.1 TITLE

4. 2 NAME 4.3 STREET ADDRESS

51 TITLE

5.2 NAME

61 TITLE

6.2 NAME

4.4 CITY+ST-ZIP

5.3 STREET ADDRESS 5.4 CITY - ST - ZIP

6.3 STREET ADDRESS

SIGNATURE:

TRUE

NAME

Titl: 6 NAME

THEF

NAME

STREET ADDRESS

STREET ADDRESS

SHREET ADDRESS

CITY - \$1 - 70

SIGNATURE AND TYPED OF PRINTED NAME OF BIGNING OFFICER OF DIRECTOR

DELETE

DELETE

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FILED

Apr 08 1997 8:00am

Secretary of State