

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # V65814

(8)

1. Corporation Name

MATTLIN & MCCLOSKEY, P.A.

Principal Place of Business

2300 GLADES RD
STE. 400, EAST TOWER
BOCA RATON FL 33431
US

Mailing Address

2300 GLADES RD.
STE. 400, EAST TOWER
BOCA RATON FL 33431
US



2. Principal Place of Business

21

State, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

State, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

MCCLOSKEY, GREGG W
2300 GLADES RD
STE. 400 EAST TOWER
BOCA RATON FL 33431

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 607.0503, Florida Statutes, Inc. above named corporation, submit 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 607.0506, Florida Statutes.

SIGNATURE

Signature taken personally of the person designated as agent.

Signature taken personally of the person designated as agent.

Date

12. OFFICERS AND DIRECTORS

TITLE

PD

NAME

MATTLIN, FRED W

STREET ADDRESS

STE 901, 5355 TOWN CENTER ROAD

CITY-STATE-ZIP

BOCA RATON FL

☐ DELETE

TITLE

VD

NAME

MCCLOSKEY, GREG W

STREET ADDRESS

STE. 901, 5355 TOWN CENTE RD

CITY-STATE-ZIP

BOCA RATON FL

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

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TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

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TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

☐ DELETE

13.

1. TITLE

2. NAME

3. STREET ADDRESS

4. CITY-STATE-ZIP

5. TITLE

6. NAME

7. STREET ADDRESS

8. CITY-STATE-ZIP

9. TITLE

10. NAME

11. STREET ADDRESS

12. CITY-STATE-ZIP

13. TITLE

14. NAME

15. STREET ADDRESS

16. CITY-STATE-ZIP

17. TITLE

18. NAME

19. STREET ADDRESS

20. CITY-STATE-ZIP

21. TITLE

22. NAME

23. STREET ADDRESS

24. CITY-STATE-ZIP

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change

☐ Addition

☐ Change

☐ Addition

☐ Change

☐ Addition

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☐ Addition

☐ Change

☐ Addition

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☐ Addition

14. I do hereby certify that the information supplied in this filing is voluntarily furnished and does not qualify for the exemption statement in Section 119.07(9)(b), Florida Statutes. I further certify that the information indicated on the annual report or supplementary annual report is true, and I declare 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 registered business entity to be reported 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:

Fred W. Mattlin

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

PARTNER

3/25/96

407-368-9200

CR2E034 (12/95)