

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # V66616 (6)

1. Corporation Name

JOHN A. YANCHEK, P.A.



Principal Place of Business

939 ALAMEDA WAY
SUITE 900
SARASOTA FL 34234
US

Mailing Address

939 ALAMEDA WAY
SUITE 900
SARASOTA FL 34234
US

3. Date Incorporated or Qualified
09/25/1992

3a. Date of Last Report
02/17/1995

2. Principal Place of Business

21 1515 RINGLING BLVD

2a. Mailing Address

26 1515 RINGLING BLVD

4. FEI Number

65-0357750

Applied For
Not Applicable

Suite, Apt. #, etc.

22 SUITE 800

Suite, Apt. #, etc.

27 SUITE 800

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

City & State

23 SARASOTA, FLA

City & State

28 SARASOTA, FLA

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

Zip

24 34236

Country

25 US

Zip

29 34236

Country

30 US

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

YANCHEK, JOHN A.
1750 RINGLING BLVD
SUITE 900
SARASOTA FL 34236

81 Name

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

1515 RINGLING BLVD

83 SUITE 800

84 City

SARASOTA

FL

85 Zip Code

34236

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

John A. Yancheke

JOHN A. YANCHEK

4/30/96

(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE DPST ☐ DELETE
NAME YANCHEK, JOHN A.
STREET ADDRESS 939 ALAMEDA WAY
CITY-ST-ZIP SARASOTA 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

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE DPST ☒ Change ☐ Addition
1.2 NAME JOHN A. YANCHEK
1.3 STREET ADDRESS 4252 MOSS OAK PLACE
1.4 CITY-ST-ZIP SARASOTA FLA 34231

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

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

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

John A. Yancheke

JOHN A. YANCHEK

4/30/96

(941) 366-7177

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone

CR2E034 (12/95)