	PROFIT RPORATION JAL REPORT 1996		Secr	PARTMENT C ra B. Morthar etary of State DF CORPORA	m e							
DOCU 1. Corporatio	MENT # V736	390	(2)									
ALFRI	ED O. SMITH D.C., P.A. e of Business NEY POINT RD	2	ing Address 477 STICKNEY POI	NT RD								
SARASOTA			SUITE 202A SARASOTA FL 3423	1		3. Date Incorporated or Qualific		e of Last F				
2. Principal P	ace of Business	2a. N	Mailing Address			10/22/1992 4. FEt Number	0	25/01/19	Applied For			
Suite, Apt.	#. etc	26	Suite, Apt. #, etc.			65-0365054			Not Applicable			
22		27				5. Certificate of Status Desired			Additional Required			
City & State)	28	Dity & State			Election Campaign Financing Trust Fund Contribution	g 🗆		O May Be			
Zip 24	Country 25		Ž ip	Coun	itry	8. This corporation has liability			d to Fees 199.032,			
	9. Name and Address of Cur	29 rent Registe	red Agent	30		Florida Statutes	Yes No w Registered	Acent				
2477 S	2477 STICKNEY POINT RD SUITE 202A SARASOTA FL 34231 11. Pursuant to the provisions of Sections 607.0502 and or registered agent, or both, in the State of Florida. If familiar with, and accept the obligations of, Section			1.	32 Street Add	iress (P.O. Box Number is Not Accep	otable)		FL 85 Zip Code ration submits this statement for the purpose of changing its registered office and of directors. I hereby accept the appointment as registered agent. I am			
SUITE (SARAS 11. Pursuant t or register	202A OTA FL 34231 o the provisions of Sections 607.08 ed agent, or both, in the State of F			tes, the above	33 34 City		FL	<u>. L.L.</u>				
SUITE : SARAS	202A DTA FL 34231 o the provisions of Sections 607.0t ed agent, or both, in the State of Fl., and accept the obligations of, S	ection 607,05	05, Florida Statute	tes, the above zed by the cos.	33 City e-named corporation's boa	ration submits this statement for the ard of directors. I hereby accept the a	FL purpose of cha appointment as	<u>. L.L.</u>				
SUITE: SARAS: 11. Pursuant to register familiar with SIGNATURE 12.	202A DTA FL 34231 of the provisions of Sections 607.03 ed agent, or both, in the State of Fl h, and accept the obligations of, S Signature, typed or printed name of registered a OFFICERS	ection 607,05	05, Florida Statute	tes, the above zed by the cos.	33 34 City	ration submits this statement for the ard of directors. I hereby accept the a	FL purpose of cha appointment as	anging its registered	egistered office agent. I am			
SUITE : SARAS: 11. Pursuant to register familiar with SIGNATURE	202A OTA FL 34231 of the provisions of Sections 607.03 and agent, or both, in the State of Fig., and accept the obligations of, Segnature, typed or printed name of registered a	ection 607,05	05, Florida Statute	tes, the above zed by the cos. OTE: Registered A. 13.	e-named corporproration's boar	ration submits this statement for the ard of directors. I hereby accept the a	FL purpose of cha appointment as DATE DEFICERS AND	anging its registered	egistered office agent. I am			
SUITE: SARAS: 11. Pursuant to register familiar with SIGNATURE. 12.	202A OTA FL 34231 of the provisions of Sections 607.03 and agent, or both, in the State of Fig. 1, and accept the obligations of, Segmentive, typed or printed name of registered at OFFICERS AD SMITH, ALFRED O. 2477 STICKNEY POINT RI	ection 607,05 gent and little if appl	05, Florida Statute	tes, the above zed by the cos. OTE: Registered A. 13. 1.1 TITL 12 NAM	e-named corporproration's boar	ration submits this statement for the ard of directors. I hereby accept the a	FL purpose of cha appointment as DATE DEFICERS AND	anging its registered	egistered office agent. I am PRS IN 12			
SUITE: SARAS 11. Pursuant to register familiar with SIGNATURE 12. TITLE NAME STREEL ADDRESS CITY-ST-ZIP	202A OTA FL 34231 o the provisions of Sections 607.08 ed agent, or both, in the State of Fi h, and accept the obligations of, S Signature, typed or printed name of registered at OFFICERS A D SMITH, ALFRED O.	ection 607,05 gent and little if appl	icable INDELETE	tes, the above zed by the cos. OTE Registered A. 13. 1.1 TITL 1.2 NAM 1.3 STRE 1.4 CITY	B3 City e-named corporation's boarporation's boarporation	ration submits this statement for the ard of directors. I hereby accept the a	PL purpose of cha appointment as DATE DEFICERS AND	anging its in registered	egistered office agent. I am PRS IN 12			
SUITE : SARAS: 11. Pursuant to register familiar with SIGNATURE 12. TILE NAME STREET ADDRESS	202A OTA FL 34231 of the provisions of Sections 607.03 and agent, or both, in the State of Fig. 1, and accept the obligations of, Segmentive, typed or printed name of registered at OFFICERS AD SMITH, ALFRED O. 2477 STICKNEY POINT RI	ection 607,05 gent and little if appl	05, Florida Statute	tes, the above zed by the cos. OTE Registered A. 13. 1.1 TITL 12 NAM 13 STRE	e-named corporation's boar signature require E E E E E E T T T T T E E	ration submits this statement for the ard of directors. I hereby accept the a	PL purpose of cha appointment as DATE DEFICERS AND	anging its registered	egistered office agent. I am			
SUITE: SARAS: 11. Pursuant tor register familiar with signature. 12. Title NAME. STREET ADDRESS. CITY-S1-ZIP. TITLE NAME. STREET ADDRESS.	202A OTA FL 34231 of the provisions of Sections 607.03 and agent, or both, in the State of Fig. 1, and accept the obligations of, Segmentive, typed or printed name of registered at OFFICERS AD SMITH, ALFRED O. 2477 STICKNEY POINT RI	ection 607,05 gent and little if appl	icable INDELETE	Tes, the above zed by the costs. OTE: Registered A 13. 1.1 TITL 1.2 NAM 1.3 STRE 1.4 CITY 2.1 TITL 2.2 NAM	e-named corporation's boar signature require E E E E E E T T T T T E E	ration submits this statement for the ard of directors. I hereby accept the a	PL purpose of cha appointment as DATE DEFICERS AND	anging its in registered	egistered office agent. I am PRS IN 12			
SUITE: SARAS 11. Pursuant to register familiar with signature. 12. Title NAME STREET ADDRESS CITY-S1-ZIP TITLE NAME	202A OTA FL 34231 of the provisions of Sections 607.03 and agent, or both, in the State of Fig. 1, and accept the obligations of, Segmentive, typed or printed name of registered at OFFICERS AD SMITH, ALFRED O. 2477 STICKNEY POINT RI	ection 607,05 gent and little if appl	COS, Florida Statute Cable	tes, the above zed by the cos. 13. 1.1 TITL 1.2 NAM 1.3 STRE 1.4 CITY 2.1 TITL 2.2 NAM 2.3 STRE 2.4 CITY	e-named corporation's boar gent signature require E E E E E T T T T T T T T	ration submits this statement for the ard of directors. I hereby accept the a	purpose of cha appointment as DATE DEFICERS AND	Inging its in registered DIRECTO Change Change	egistered office agent. I am PRS IN 12 Addition Addition			
SUITE: SARAS 11. Pursuant to register familiar with suits and the suits	202A OTA FL 34231 of the provisions of Sections 607.03 and agent, or both, in the State of Fig. 1, and accept the obligations of, Segmentive, typed or printed name of registered at OFFICERS AD SMITH, ALFRED O. 2477 STICKNEY POINT RI	ection 607,05 gent and little if appl	icable INDELETE	tes, the above zed by the coss. OTE: Registered A. 13. 1.1 TITL 1.2 NAM 1.3 STRE 1.4 CITY 2.1 TITL 2.2 NAM 2.3 STRE	e-named corporation's boar gent signature require E E E E E E T T T T T T T	ration submits this statement for the ard of directors. I hereby accept the a	purpose of cha appointment as DATE DEFICERS AND	anging its in registered	egistered office agent. I am PRS IN 12			
SUITE: SARAS 11. Pursuant to register familiar with signature 12. Title NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	202A OTA FL 34231 of the provisions of Sections 607.03 and agent, or both, in the State of Fig. 1, and accept the obligations of, Segmentive, typed or printed name of registered at OFFICERS AD SMITH, ALFRED O. 2477 STICKNEY POINT RI	ection 607,05 gent and little if appl	COS, Florida Statute Cable	tes, the above zed by the coss. 13. 1.11ii. 12.NAM 1.3 STRE 1.4 City 2.1 Tifl 22.NAM 23.STRE 24.CITY 3.1 Tifl 32.NAM	e-named corporation's boar gent signature require E E E E E E T T T T T T T	ration submits this statement for the ard of directors. I hereby accept the a	purpose of cha appointment as DATE DEFICERS AND	Inging its in registered DIRECTO Change Change	egistered office agent. I am PRS IN 12 Addition Addition			
SUITE: SARAS 11. Pursuant to register familiar with suits and the suits	202A OTA FL 34231 of the provisions of Sections 607.03 and agent, or both, in the State of Fig. 1, and accept the obligations of, Segmentive, typed or printed name of registered at OFFICERS AD SMITH, ALFRED O. 2477 STICKNEY POINT RI	ection 607,05 gent and little if appl	COS, Florida Statute Cable CN DELETE DELETE DELETE	tes, the above zed by the coss. 13. 1.11/II. 1.2 NAM 1.3 STRE 1.4 City 2.1 TifL 2.2 NAM 2.3 STRE 2.4 CITY 3.1 TIFL 3.2 NAM 3.3 STRE 3.4 CITY	e-named corporation's boar open signature require EE EET ADDRESS -ST-ZIP E EET ADDRESS -ST-ZIP E EET ADDRESS -ST-ZIP E E EET ADDRESS -ST-ZIP E E E E E E E E E E E E E	ration submits this statement for the ard of directors. I hereby accept the a	PL purpose of cha appointment as	nnging its i registered DIRECTO Change Change	egistered office agent. I am RS IN 12 Addition Addition			
SUITE: SARAS 11. Pursuant to register familiar with suits and the state of the sta	202A OTA FL 34231 of the provisions of Sections 607.03 and agent, or both, in the State of Fig. 1, and accept the obligations of, Segmentive, typed or printed name of registered at OFFICERS AD SMITH, ALFRED O. 2477 STICKNEY POINT RI	ection 607,05 gent and little if appl	COS, Florida Statute Cable	tes, the above zed by the coss. 13. 1.11ll. 12.NAM 1.3 STRE 2.1 TITL 22.NAM 23.STRE 24.CITY 3.1 TITL 32.NAM 33.STRE 34.CITY 4.1 TITLI	e-named corporation's boar gent signature require E.E. E.E.E.E.E.E.E.E.E.E.E.E.E.E.E.E.E	ration submits this statement for the ard of directors. I hereby accept the a	PL purpose of cha appointment as	Inging its in registered DIRECTO Change Change	egistered office agent. I am PRS IN 12 Addition Addition			
SUITE: SARAS 11. Pursuant to register familiar with signature 12. Title NAME STREET ADDRESS CITY-S1-ZIP TITLE NAME	202A OTA FL 34231 of the provisions of Sections 607.03 and agent, or both, in the State of Fig. 1, and accept the obligations of, Segmentive, typed or printed name of registered at OFFICERS AD SMITH, ALFRED O. 2477 STICKNEY POINT RI	ection 607,05 gent and little if appl	COS, Florida Statute Cable CN DELETE DELETE DELETE	tes, the above zed by the coss. 13. 1.1 Tifl. 1.2 NAM 1.3 STRE 2.4 City 3.1 Tifl. 3.2 NAM 3.3 STRE 3.4 City 4.1 Tifl. 4.2 NAM	e-named corporation's boar gent signature require E.E. E.E.E.E.E.E.E.E.E.E.E.E.E.E.E.E.E	ration submits this statement for the ard of directors. I hereby accept the a	PL purpose of cha appointment as	nnging its i registered DIRECTO Change Change	egistered office agent. I am RS IN 12 Addition Addition			
SUITE: SARAS 11. Pursuant to register familiar with surfamiliar with surfamiliar with surfamiliar with surfamiliar with surfamiliar with surfamiliar	202A OTA FL 34231 of the provisions of Sections 607.03 and agent, or both, in the State of Fig. 1, and accept the obligations of, Segmentive, typed or printed name of registered at OFFICERS AD SMITH, ALFRED O. 2477 STICKNEY POINT RI	ection 607,05 gent and little if appl	DELETE DELETE	tes, the above zed by the coss. 13. 1.1 Tifl. 1.2 NAM 1.3 STRE 2.4 City 3.1 Tifl. 3.2 NAM 3.3 STRE 4.4 City 4.1 Tifl. 4.2 NAM 4.3 STRE 4.4 City 4.1 Tifl. 4.3 STRE 4.4 City	e-named corporation's boar portion's boar gent signature require. E. E	ration submits this statement for the ard of directors. I hereby accept the a	PL purpose of cha appointment as	nnging its i registered DIRECTC Change Change	egistered office agent. I am RS IN 12 Addition Addition Addition			
SUITE: SARAS 11. Pursuant to register familiar with corregister familiar with suitable suita	202A OTA FL 34231 of the provisions of Sections 607.03 and agent, or both, in the State of Fig. 1, and accept the obligations of, Segmentive, typed or printed name of registered at OFFICERS AD SMITH, ALFRED O. 2477 STICKNEY POINT RI	ection 607,05 gent and little if appl	COS, Florida Statute Cable CN DELETE DELETE DELETE	tes, the above zed by the coss. 13. 1.1 Tiff. 1.2 NAM 1.3 STRE 2.4 CITY 3.1 TIFL 3.2 NAM 3.3 STRE 3.4 CITY 4.1 TIFL 4.2 NAM 4.3 STRE 4.4 CITY 5.1 TIFL 5.1	B3 City e-named corporation's boar portion's boar gent signature require E. E	ration submits this statement for the ard of directors. I hereby accept the a	PL purpose of cha appointment as	nnging its i registered DIRECTO Change Change	egistered office agent. I am RS IN 12 Addition Addition			
SUITE: SARAS 11. Pursuant to register familiar with or register familiar with suitable suita	202A OTA FL 34231 of the provisions of Sections 607.03 and agent, or both, in the State of Fig. 1, and accept the obligations of, Segmentive, typed or printed name of registered at OFFICERS AD SMITH, ALFRED O. 2477 STICKNEY POINT RI	ection 607,05 gent and little if appl	DELETE DELETE	tes, the above zed by the coss. 13. 1.1 Tifl. 1.2 NAM 1.3 STRE 1.4 CITY 2.1 Tifl. 2.2 NAM 2.3 STRE 2.4 CITY 3.1 TIFL 3.2 NAM 3.3 STRE 4.1 TIFL 4.2 NAM 4.3 STRE 4.4 CITY 5.1 TIFL 5.2 NAME	B3 City e-named corporation's boar portion's boar gent signature require E. E	ration submits this statement for the ard of directors. I hereby accept the a	PL purpose of cha appointment as	nnging its i registered DIRECTC Change Change	egistered office agent. I am RS IN 12 Addition Addition Addition			
SUITE: SARAS 11. Pursuant to register familiar with or register familiar with suitable suita	202A OTA FL 34231 of the provisions of Sections 607.03 and agent, or both, in the State of Fig. 1, and accept the obligations of, Segmentive, typed or printed name of registered at OFFICERS AD SMITH, ALFRED O. 2477 STICKNEY POINT RI	ection 607,05 gent and little if appl	DELETE DELETE DELETE	tes, the above zed by the coss. 13. 1.1 Tiff. 1.2 NAM 1.3 STRE 2.4 CITY 3.1 TIFL 3.2 NAM 3.3 STRE 4.1 TIFL 4.2 NAM 4.3 STRE 4.4 CITY 5.1 TIFL 5.2 NAM 5.3 STRE 5.4 CITY	B33 B4 City e-named corporation's boal gent signature require E E EET ADDRESSST-ZIP E EET ADDRESSST-ZIP E ET ADDRESSST-ZIP E	ration submits this statement for the ard of directors. I hereby accept the a	PL purpose of cha appointment as	nnging its i registered DIRECTC Change Change	egistered office agent. I am RS IN 12 Addition Addition Addition			
SUITE: SARAS 11. Pursuant to register familiar with corregister familiar with suitable suita	202A OTA FL 34231 of the provisions of Sections 607.03 and agent, or both, in the State of Fig. 1, and accept the obligations of, Segmentive, typed or printed name of registered at OFFICERS AD SMITH, ALFRED O. 2477 STICKNEY POINT RI	ection 607,05 gent and little if appl	DELETE DELETE	tes, the above zed by the coss. 13. 1.1 Tiff. 1.2 NAM 1.3 STRE 1.4 CITY 2.1 Tiff. 2.2 NAM 2.3 STRE 3.4 CITY 4.1 TIFL. 4.2 NAM 4.3 STRE 4.4 CITY 5.1 TIFL. 5.2 NAM 5.3 STRE 5.4 CITY 6.1 TIFL.	B3 City e-named corporation's boal progration's boal progration's boal gent signature requires E	ration submits this statement for the ard of directors. I hereby accept the a	PL purpose of cha appointment as	nnging its i registered DIRECTC Change Change	egistered office agent. I am RS IN 12 Addition Addition Addition			
SUITE: SARAS 11. Pursuant to register familiar with content of the property o	202A OTA FL 34231 of the provisions of Sections 607.03 and agent, or both, in the State of Fig. 1, and accept the obligations of, Segmentive, typed or printed name of registered at OFFICERS AD SMITH, ALFRED O. 2477 STICKNEY POINT RI	ection 607,05 gent and little if appl	DELETE DELETE DELETE	tes, the above zed by the coss. 13. 1.1 Tiff. 1.2 NAM 1.3 STRE 1.4 CITY 2.1 Tiff. 2.2 NAM 2.3 STRE 3.4 CITY 4.1 TIFL. 4.2 NAM 4.3 STRE 4.4 CITY 5.1 TIFL. 5.2 NAM 5.3 STRE 5.4 CITY 6.1 TIFL. 6.2 NAME 6.2 NAME 6.2 NAME 6.3 NAME 6	B3 City e-named corporation's boal progration's boal progration's boal gent signature requires E	ration submits this statement for the ard of directors. I hereby accept the a	PL purpose of cha appointment as	nnging its i registered DIRECTC Change Change Change	egistered office agent. I am RS IN 12 Addition Addition Addition Addition			

SIGNATURE: __

425-96 941-923 2567