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Apr 08 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # J78432 (8)
1. Corporation Name
FOURNIER & PRETSCHNER, A PROFESSIONAL ASSOCIATIO
N



Principal Place of Business % ROBERT M. PRETSCHNER 1800 SECOND ST #803 SARASOTA FL 34236		Mailing Address % ROBERT M. PRETSCHNER 1800 SECOND ST #803 SARASOTA FL 34236-5955		3. Date Incorporated or Qualified 06/18/1987	3a. Date of Last Report 04/15/1996
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2. Principal Place of Business 21 22 So Tuttle Avenue Suite, Apt. #, etc. 22 Suite 4 City & State 23 Sarasota FL	2a. Mailing Address 26 22 So Tuttle Avenue Suite, Apt. #, etc. 27 Suite 4 City & State 28 Sarasota, FL	4. FEI Number 59-2816863	Applied For Not Applicable	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
24 Zip 34237	25 Country Sarasota	29 Zip 34237	30 Country Sarasota			

9. Name and Address of Current Registered Agent PRETSCHNER, ROBERT M. 1800 SECOND ST #803 1800 SECOND STREET SARASOTA FL 34236				10. Name and Address of New Registered Agent 81 Name Robert M. Fournier 82 Street Address (P.O. Box Number is Not Acceptable) 22 So Tuttle Avenue 83 Suite 4 84 City Sarasota FL 85 Zip Code 34237			
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11. Pursuant to the provisions of Sections 607.0505 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: *Robert M. Fournier* DATE: 4/2/97

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE D	DELETE <input type="checkbox"/>	1.1 TITLE	Change <input type="checkbox"/> Addition <input type="checkbox"/>
NAME FOURNIER, ROBERT M		1.2 NAME	
STREET ADDRESS 5673 CREEKWOOD DR		1.3 STREET ADDRESS	
CITY-ST-ZIP SARASOTA FL		1.4 CITY-ST-ZIP	
TITLE D	DELETE <input type="checkbox"/>	2.1 TITLE	Change <input type="checkbox"/> Addition <input type="checkbox"/>
NAME PRETSCHNER, ROBERT M.		2.2 NAME	
STREET ADDRESS 214 WOODLAND DRIVE		2.3 STREET ADDRESS	
CITY-ST-ZIP OSPREY FL		2.4 CITY-ST-ZIP	
TITLE D	DELETE <input checked="" type="checkbox"/>	3.1 TITLE	Change <input type="checkbox"/> Addition <input type="checkbox"/>
NAME REINICKE, STEPHANIE		3.2 NAME	
STREET ADDRESS 1714 WARDEMERE ST		3.3 STREET ADDRESS	
CITY-ST-ZIP SARASOTA FL		3.4 CITY-ST-ZIP	
TITLE	DELETE <input type="checkbox"/>	4.1 TITLE	Change <input type="checkbox"/> Addition <input type="checkbox"/>
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	DELETE <input type="checkbox"/>	5.1 TITLE	Change <input type="checkbox"/> Addition <input type="checkbox"/>
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	DELETE <input type="checkbox"/>	6.1 TITLE	Change <input type="checkbox"/> Addition <input type="checkbox"/>
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 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 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 both, in attachment with an address.

SIGNATURE: *Robert M. Fournier* DATE: 4/2/97 (941) 957-3980

CR2E034 (9/96)