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

CORPORATION ANNUAL REPORT 1995

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

APPROVED AND FILED
95 APR 28 AM 10:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 630581 (7)

1. Corporation Name
H. F. YOUNG ENTERPRISES, INC.

Principal Place of Business
~~8789 SAN JOSE BLVD.~~
~~STE #304~~
JACKSONVILLE FL 32217
US

Mailing Address
~~8789 SAN JOSE BLVD.~~
~~STE 304~~
JACKSONVILLE FL 32217
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 07/24/1979
3a. Date of Last Report: 03/07/1994
4. FEI Number: 59-1931822 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

21 2. Principal Place of Business: 4202 BAYMEADOWS RD
22 Suite, Apt. #, etc.
23 City & State: JACKSONVILLE, FL
24 Zip: 32217
25 Country: DUVAL

26 2a. Mailing Address: 4202 BAYMEADOWS RD
27 Suite, Apt. #, etc.
28 City & State: JACKSONVILLE FL
29 Zip: 32217
30 Country: DUVAL

9. Name and Address of Current Registered Agent

YOUNG, H. F.
~~8789 SAN JOSE BLVD, #304~~
~~JACKSONVILLE FL 32225~~
MOVED

10. Name and Address of New Registered Agent

81 Name: SAME
82 Street Address (P.O. Box Number is Not Acceptable): 4202 BAYMEADOWS ROAD
83
84 City: JACKSONVILLE, FL 85 Zip Code: 32217

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 _____ DATE _____

| 12. OFFICERS AND DIRECTORS | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
|---|---|---|---|
| TITLE | PD | | ☐ Change ☐ Addition |
| NAME | YOUNG, H. F. | | |
| STREET ADDRESS | ~~8789 SAN JOSE BLVD, #304~~ | 4202 BAYMEADOWS RD | |
| CITY, ST, ZIP | JACKSONVILLE FL | 32217 | |
| TITLE | VP | | ☐ Change ☐ Addition |
| NAME | YOUNG, DONALD V. | | |
| STREET ADDRESS | 9254 BEAUCHERC CR. E. | | |
| CITY, ST, ZIP | JACKSONVILLE FL | | |
| TITLE | VP | | ☐ Change ☐ Addition |
| NAME | YOUNG, OLIVIA | 4202 BAYMEADOWS RD | |
| STREET ADDRESS | ~~8789 SAN JOSE BLVD. #304~~ | 32217 | |
| CITY, ST, ZIP | JACKSONVILLE FL | | |
| TITLE | | | ☐ Change ☐ Addition |
| NAME | | | |
| STREET ADDRESS | | | |
| CITY, ST, ZIP | | | |
| TITLE | | | ☐ Change ☐ Addition |
| NAME | | | |
| STREET ADDRESS | | | |
| CITY, ST, ZIP | | | |
| TITLE | | | ☐ Change ☐ Addition |
| NAME | | | |
| STREET ADDRESS | | | |
| CITY, ST, ZIP | | | |

14. I do hereby certify that the information supplied with this report is voluntarily furnished and 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 above, or on an attachment with an address.

SIGNATURE: _____ H F YOUNG 4/26/95 904-636-9552
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0019198 CP