

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**CORPORATION
ANNUAL REPORT
1995**FLORIDA DEPARTMENT OF STATE
Sandra D. Northam
Secretary of State
DIVISION OF CORPORATIONS**APPROVED
AND
FILED**

95 MAR 16 AM 11:05

SECRETARY OF STATE
TALLAHASSEE, FLORIDA**DOCUMENT # 821337 (3)**

1. Corporation Name

BAX-STEEL BUILDINGS INC

Principal Place of Business

P.O. BOX 345
JEKYLL RD.
BAXLEY GEORGIA 31513

Mailing Address

P.O. BOX 345
JEKYLL RD.
BAXLEY GEORGIA 31513

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

04/16/1968

3a. Date of Last Report

03/18/1994

4. FEI Number

58-0630853

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

2. Principal Place of Business

21 Suite, Apt. #, etc.

2a. Mailing Address

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

24 25

28 Zip Country

29 30

9. Name and Address of Current Registered Agent

UPCHURCH, EDDIE R.
2727 NORTH ATLANTIC AVENUE
DAYTONA BEACH FL

10. Name and Address of New Registered Agent

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 607.1508, 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE D
NAME LAMB, ORBY W
STREET ADDRESS ROUTE 5
CITY-ST-ZIP BAXLEY, GA 00000TITLE PD
NAME UPCHURCH, EDDIE R
STREET ADDRESS ROUTE 1
CITY-ST-ZIP BAXLEY, GA 00000TITLE DS
NAME SPELL, ANNIE LOIS H
STREET ADDRESS FOREST ROAD
CITY-ST-ZIP BAXLEY, GA 00000TITLE V
NAME UPCHURCH, DAVID
STREET ADDRESS ROUTE 1
CITY-ST-ZIP BAXLEY, GA 00000TITLE T
NAME UPCHURCH, KENNETH
STREET ADDRESS ROUTE 1
CITY-ST-ZIP BAXLEY GATITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Filing Fee #