

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Feb 09 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 825604 (2)
 1. Corporation Name
C.J. GAYFER & COMPANY, INCORPORATED

Principal Place of Business SPRINGDALE PLAZA 3250 AIRPORT BLVD UNIT 6B MOBILE AL 36606 US	Mailing Address % MERCANTILE STORES CO., INC 9450 SEWARD RD FAIRFIELD OH 45014
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
24 Country	29 Country

3. Date Incorporated or Qualified 01/15/1971	
4. FEI Number 63-0080060	Applied For <input type="checkbox"/> 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 owes or has paid the current year intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**CROCKETT, ELIZABETH B
 5100 N 9TH AVE
 PENSACOLA FL 32504**

10. Name and Address of New Registered Agent

81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	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 _____ DATE _____
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD SHANNON, M G <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SHANNON, M G	1.2 NAME	
STREET ADDRESS	SPRINGDALE PLAZA	1.3 STREET ADDRESS	
CITY-ST-ZIP	MOBILE AL	1.4 CITY-ST-ZIP	
TITLE	VP BURNETTE, R L <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BURNETTE, R L	2.2 NAME	
STREET ADDRESS	9450 SEWARD RD	2.3 STREET ADDRESS	
CITY-ST-ZIP	FAIRFIELD OH	2.4 CITY-ST-ZIP	
TITLE	VD MCVICKER, J.M. <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MCVICKER, J.M.	3.2 NAME	
STREET ADDRESS	9450 SEWARD ROAD	3.3 STREET ADDRESS	
CITY-ST-ZIP	FAIRFIELD OH	3.4 CITY-ST-ZIP	
TITLE	CD NICHOLS, D. L. <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	NICHOLS, D. L.	4.2 NAME	
STREET ADDRESS	9450 SEWARD RD	4.3 STREET ADDRESS	
CITY-ST-ZIP	FAIRFIELD OH	4.4 CITY-ST-ZIP	
TITLE	VP RIPLEY, I.L. <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RIPLEY, I.L.	5.2 NAME	
STREET ADDRESS	9450 SEWARD RD.	5.3 STREET ADDRESS	
CITY-ST-ZIP	FAIRFIELD OH	5.4 CITY-ST-ZIP	
TITLE	ST W.A. CARR <input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	W.A. CARR	6.2 NAME	
STREET ADDRESS	9450 SEWARD ROAD	6.3 STREET ADDRESS	
CITY-ST-ZIP	FAIRFIELD OH	6.4 CITY-ST-ZIP	

14. I 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 only, and that I am not required 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 asterisk.

SIGNATURE:  William A. Carr 1/28/98 (513) 881-8000

CP2E034 (1097)