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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F08311

EPPERSON & COMPANY - JACKSONVILLE, INC.

Mailing Address Principal Place of Business 115 WATTS STREET 115 WATTS STREET PO BOX 40745 PO BOX 40745 JACKSONVILLE FL 32203-0745 JACKSONVILLE FL 32203 3a. Date of Last Report 3. Date Incorporated or Qualified 12/09/1980 04/11/1996 4. FEI Number Applied For 28. Mailing Address 2. Principal Place of Business 59-2041042 Not Applicable Suite, Apt. #, etc. \$8.75 Additional Suite Apt # etc 5. Certificate of Status Desired Fee Required 27 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 28 23 Country This corporation has liability for intangible tax under s. 199.032, Country Zψ Yes No 30 Florida Statutes 25 29 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent SMITH, DERILL RAY 18301 BOYETTE RD 82 Street Address (P.O. Box Number is Not Acceptable) LITHIA FL 33547 83 84 City Zip Code 85 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 fameliar with, and accept the obligations of, Section 607.0505, Florida Statutes. Signal Les typen or printed name or registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6) OFFICERS AND DIRECTORS 13. 12 Addition Change DELETE 1.1 TITLE TITLE HARRIS, ROBERT D 1.2 NAME CRZE034 NAME 6709 S HESPERIDES 1.3 STREET ADDRESS STREET ADDRESS TAMPA FL 1.4 CITY-ST-7IP CITY ST- 7IP Channe Addition DELETE 2.1 TITLE THEF SMITH, DERILL R. 2.2 NAME NAME 18301 BOYETTE RD. 2.3 STREET ADDRESS STREET ADORESS LITHIA FL 2. 4 CITY - ST- ZIP City-St-ZiP Change Addition DELETE TITLE 3.1 TITLE ABBITT, J.M., JR. 3.2 NAME NAME 2608 COVENTRY AVE. 3.3 STREET ADDRESS STREET ADDRESS LAKELAND FL 3.4. CITY - ST - ZIP CRY SI-72 Addition DELETE 41 TITLE HitE SMITH, CARL 4 2 NAME NAME 3503 STEARNS RD 4.3 STREET ADDRESS SCHEEL ADDRESS VALRICO FL 4.4 CiTY - ST - 7IP CEM \$1 ZP DELETE Change Addition 51 TITLE T(I; E 5.2 NAME NAVI 5.3 STREET ADDRESS \$48611.4003635 5.4 CITY-ST-ZIP CHY-SL-7P Addition Change DELETE 6.1 TITLE THE

6.2 NAME

6.3 STREET ADDRESS

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 are 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

SIGNATURE:

NAMS

STREET ADDRESS

appears in Block 12 or Block 13 if changed, or on an attachment with an address

813 626-6125

FILED

Apr 02 1997 8:00am

Secretary of State