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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 JUN 15 PM 11:43

DOCUMENT # **F82712** **(3)**

1. Corporation Name
WALLER BUSINESS FORMS, INC.

Principal Place of Business	Mailing Address
3960 BARRANCAS AVE P.O. BOX 4610 PENSACOLA FL 32507-1310	3960 BARRANCAS AVE P.O. BOX 4610 PENSACOLA FL 32507-1310

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 05/25/1982
3a. Date of Last Report: 02/21/1994

2. Principal Place of Business	2a. Mailing Address
21 480 Van Pelt Lane.	26 480 Van Pelt Lane.
Suite, Apt. #, etc 22 PO. Box 37188	Suite, Apt. #, etc 27 P.O. Box 37188
City & State 23 Pensacola, FL	City & State 28 Pensacola, FL
Zip / Country 24 32526 / 25	Zip / Country 29 32526 / 30

4. FEI Number: 59-2218432 ☐ 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

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
GREEN, ROGER E. 3960 BARRANCAS AVE. PENSACOLA FL 32507-7557	81 Name 82 Street Address (P.O. Box Number is Not Acceptable): 480 Van Pelt Lane 83 84 City: Pensacola FL 85 Zip Code: 32505

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: X [signature] 6-12-95
Signature, typed or printed name of registered agent and title if applicable — Registered Agent signature required when mandated — DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP	11 TITLE	☑ Change ☐ Addition
NAME	GREEN, ROGER E.	12 NAME	
STREET ADDRESS	3960 BARRANCAS AVE.	13 STREET ADDRESS	480 Van Pelt Lane
CITY ST ZIP	PENSACOLA, FL 00000	14 CITY ST ZIP	Pensacola, FL 32505
TITLE	DVP	21 TITLE	☑ Change ☐ Addition
NAME	MARSH, J. ANDREWS	22 NAME	
STREET ADDRESS	3960 BARRANCAS AVE.	23 STREET ADDRESS	480 Van Pelt Lane
CITY ST ZIP	PENSACOLA FL	24 CITY ST ZIP	Pensacola, FL 32505
TITLE	DST	31 TITLE	☑ Change ☐ Addition
NAME	FREDERICKSON, CHARLES E.	32 NAME	
STREET ADDRESS	3960 BARRANCAS AVE.	33 STREET ADDRESS	480 Van Pelt Lane
CITY ST ZIP	PENSACOLA FL	34 CITY ST ZIP	Pensacola, FL 32505
TITLE		41 TITLE	☐ Change ☐ Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY ST ZIP		44 CITY ST ZIP	
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY ST ZIP		54 CITY ST ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY ST ZIP		64 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)(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 on an attachment with an address.

SIGNATURE: X [signature] 6/12/95
SIGNATURE AND TITLE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0460412 FP