

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

APPROVED AND FILED

CORPORATION ANNUAL REPORT 1995



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

95 MAR -7 PM 2: 23

DOCUMENT # H96869 (3)

SECRETARY OF STATE TALLAHASSEE, FLORIDA

1. Corporation Name MICHAEL DOUGLAS INCORPORATED

Principal Place of Business 9965-11 SAN JOSE JACKSONVILLE FL 32257 Mailing Address 9965-11 SAN JOSE JACKSONVILLE FL 32257

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified 01/29/1986 3a. Date of Last Report 04/19/1994

4. FEI Number 59-2670811 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 2a. Mailing Address 21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc. 22 City & State 27 City & State 23 Zip 24 Country 25 Zip 29 Country 30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MICHAEL, JOAN O. 669 KINGSLEY AVENUE ORANGE PARK FL 32073

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 resigning

DATE

Table with 12 rows for Officers and Directors, including columns for Title, Name, Street Address, City, St, Zip.

Table with 13 rows for Additions/Changes to Officers and Directors in 12, including columns for Title, Name, Street Address, City, St, Zip, Change, Addition.

14. I 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)(b), Florida Statute. 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 name of signing officer or director: Larry Douglas Helton

3/2/95 904/262-9771

Date

Phone Area #