

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

CORPORATION
ANNUAL REPORT
1995



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

FILED

95 JAN 23 AM 10: 51

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **J68912** (1)

1. Corporation Name

TARRELL MOVING & STORAGE, INC.

DO NOT WRITE IN THIS SPACE.

Principal Place of Business % RONALD R. TARRELL 3656 S. HOPKINS AVE. TITUSVILLE FL 32780-5707	Mailing Address % RONALD R. TARRELL 3656 S. HOPKINS AVE. TITUSVILLE FL 32780-5707
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3. Date Incorporated or Qualified 04/21/1987	3a. Date of Last Report 01/20/1994
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2. Principal Place of Business 21	2a. Mailing Address 26
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 City & State	28 City & State
24 Zip	29 Zip
25 Country	30 Country

4. FEI Number 59-2805670	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 has liability for intangible tax under S. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**TARRELL, RONALD R.
3656 S. HOPKINS AVE.
TITUSVILLE FL 32780**

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 _____ DATE _____
(Signature: typed or printed name of registered agent and fee if applicable. (NOTE: Registered Agent signature required when re-registering))

12. OFFICERS AND DIRECTORS	
TITLE PD	TARRELL, RONALD R. 3691 SAWGRASS DR. TITUSVILLE FL
TITLE VPD	TARRELL, CAROL A. 3691 SAWGRASS DRIVE TITUSVILLE FL
TITLE D	TARRELL, JEFFREY R. 225 S TROPICAL TRAIL #706 MERRITT ISLAND FL
TITLE D	TARRELL, DANIEL M. 19 E 17TH ST ST CLOUD FL
TITLE	
TITLE	
TITLE	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	32780
2.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	32780
3.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	32952
4.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	34769
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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 110.07(3)(b), 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 and changed, or on an attachment with an address.

SIGNATURE: *Ronald R. Tarrell* **Ronald R. Tarrell** 1-17-95 407-267-0228
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date District/Parish #