

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **J78761 (0)**

1. Corporation Name
O.N., INC.



Principal Place of Business: **-2905 CORINTHIAN AVE- SUITE #12- JACKSONVILLE FL 32240- US**
Mailing Address: **P.O. BOX 7177 JACKSONVILLE FL 32238 US**

3. Date Incorporated or Qualified: **06/18/1987**
3a. Date of Last Report: **04/25/1995**
4. FEI Number: **59-2835540**
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
21 **13700 Sutton Park Dr. N.**
22 **#535**
23 **Jacksonville, Fla.**
24 **32224** 25 **Duval**

2a. Mailing Address
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9. Name and Address of Current Registered Agent
**BARTON, THOMAS L.
1833 WILLOW BRANCH TERRACE
JACKSONVILLE FL 32205**

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable): **13700 Sutton Park Dr. N., #535**
83
84 City: **Jacksonville,** FL 85 **32224**

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 607.0305, Florida Statutes.

SIGNATURE _____ DATE _____
(Signatures typed or printed name if registered agent is not the applicant) (Typed Registered Agent's name if not the shareholder)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD <input type="checkbox"/> DELETE	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BARTON, JAMES G.	1.2 NAME	
STREET ADDRESS	-106 BRIDGE CIRCLE-	1.3 STREET ADDRESS	224 Klein Road
CITY-ST-ZIP	HIGHLANDS NO	1.4 CITY-ST-ZIP	Highlands, N.C. 28741
TITLE	D <input type="checkbox"/> DELETE	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BARTON, THOMAS L.	2.2 NAME	
STREET ADDRESS	-1833 WILLOWBRANCH TERR.	2.3 STREET ADDRESS	13700 Sutton Park Dr. N., #535
CITY-ST-ZIP	- JACKSONVILLE FL-	2.4 CITY-ST-ZIP	Jacksonville, Fla. 32224
TITLE	SD <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HOLMES, BEVERLY B.	3.2 NAME	
STREET ADDRESS	53 SOUTH NINE DRIVE	3.3 STREET ADDRESS	
CITY-ST-ZIP	PONTE VEDRA BCH FL	3.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ROWE, HERNDON E.	4.2 NAME	
STREET ADDRESS	ROUTE 2 BOX 2080	4.3 STREET ADDRESS	
CITY-ST-ZIP	CLARKESVILLE GA	4.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ROWE, LANE M.	5.2 NAME	
STREET ADDRESS	ROUTE 2 BOX 2080	5.3 STREET ADDRESS	
CITY-ST-ZIP	CLARKESVILLE GA	5.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ROWE, MICHAEL	6.2 NAME	
STREET ADDRESS	501 PELHAM DRIVE, #0205	6.3 STREET ADDRESS	
CITY-ST-ZIP	COLUMBIA SC	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 119.07(3)(k), 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: _____ **James G. Barton** April 20th 1996
res./Dir. 704-526-5412

CR2E034 (12/95)