

**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

APPROVED  
AND  
FILED

95 MAR -3 AM 8:59

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # **K02916** (0)  
1. Corporation Name  
**A & C SOUTHEAST SEAFOOD, INC.**

Principal Place of Business Mailing Address  
**6059 W HWY 98 PANAMA CITY FL 32401** **6059 W HWY 98 PANAMA CITY FL 32401**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified **11/12/1987** 3a. Date of Last Report **08/10/1994**

4. FEI Number **59-2856505** 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. State, Apt. #, etc. 26. State, Apt. #, etc.  
22. City & State 27. City & State  
23. Zip Country 28. Zip Country  
24. 25. 29. 30.

9. Name and Address of Current Registered Agent  
**POPE, H. CRANSTON  
335 MAGNOLIA AVENUE  
PANAMA CITY FL 32401**

10. Name and Address of New Registered Agent  
B1 Name  
B2 Street Address (P.O. Box Number is Not Acceptable)  
B3  
B4 City **FL** B5 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 \_\_\_\_\_

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Change  Addition

TITLE **VP**  
NAME **RUSH, PHILLIP**  
STREET ADDRESS **8815 SURF DR**  
CITY, ST, ZIP **PANAMA CITY BEACH FL**

1. TITLE  
12 NAME  
13 STREET ADDRESS  
14 CITY - ST - ZIP

TITLE **P**  
NAME **CRAIGHEAD, WILLIAM D.**  
STREET ADDRESS **3815 MARINER DR**  
CITY, ST, ZIP **PANAMA CITY BEACH FL**

2. TITLE  
22 NAME  
23 STREET ADDRESS  
24 CITY - ST - ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY, ST, ZIP

3. TITLE  
32 NAME  
33 STREET ADDRESS  
34 CITY - ST - ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY, ST, ZIP

4. TITLE  
42 NAME  
43 STREET ADDRESS  
44 CITY - ST - ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY, ST, ZIP

5. TITLE  
52 NAME  
53 STREET ADDRESS  
54 CITY - ST - ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY, ST, ZIP

6. TITLE  
62 NAME  
63 STREET ADDRESS  
64 CITY - ST - ZIP

14. I, the undersigned, certify that the information supplied with this report voluntarily furnished and does not qualify for the exemption stated in Section 119.07(1)(b), Florida Statutes. I further certify that the information with which I concur does not qualify for the exemption of annual report filing and accurate and that my registration shall have the same legal effect as if made under oath. It is further certified that the information of the incorporation of the corporation is true and accurate and that my registration shall have the same legal effect as if made under oath. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes, and that my name appears on the 12th or 13th of the report, or on the statement with an affidavit.

SIGNATURE: **Phillip C. Rush** 2/27/95 904-785-1103  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR