

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 APR -7 AM 4:53

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **K90763**

(9)

1. Corporation Name

LARIAT WESTERN STORE, INC.

Principal Place of Business

2003 HWY 19 S
PERRY FL 32347

Mailing Address

2003 HWY 19 S
PERRY FL 32347

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

24 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

3. Date Incorporated or Qualified	3a. Date of Last Report
05/25/1989	05/01/1994

4. FEI Number	Applied For
59-2950114	Not Applicable

5. Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required
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6. Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/> \$5.00 May Be Added to Fees
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8. This corporation has liability for intangible tax under §. 199.032, Florida Statutes	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
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9. Name and Address of Current Registered Agent

**BLUE, W.C.
2003 HWY 19 S
PERRY FL 32347**

10. Name and Address of New Registered Agent

81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	
84	City
85	Zip Code

FL

11. Pursuant to the provisions of Sections 807.0502 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 807.0505, Florida Statutes.

SIGNATURE:

(Signature, typed or printed name of registered agent and date of appointment)

(Note: Registered Agent signature required when changing)

DATE

12. OFFICERS AND DIRECTORS

NAME
BLUE, W.C.
P.O. BOX 1357 N/A
PERRY FL

NAME
BLUE, OVEIDA ANNE
2003 HWY 19 S
PERRY FL

NAME
BLUE, OVEIDA, ANNE
2003 HWY 19 S
PERRY FL

NAME
STREET ADDRESS
CITY, ST, ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1 NAME

12 NAME

13 STREET ADDRESS

14 CITY, ST, ZIP

21 NAME

22 NAME

23 STREET ADDRESS

24 CITY, ST, ZIP

31 NAME

32 NAME

33 STREET ADDRESS

34 CITY, ST, ZIP

41 NAME

42 NAME

43 STREET ADDRESS

44 CITY, ST, ZIP

51 NAME

52 NAME

53 STREET ADDRESS

54 CITY, ST, ZIP

61 NAME

62 NAME

63 STREET ADDRESS

64 CITY, ST, ZIP

71 NAME

72 NAME

73 STREET ADDRESS