

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

DOCUMENT # K91960 (0)

1. Corporation Name

E.S. YOAKUM ASSOCIATES, INC.

Principal Place of Business

C/O STEPHEN G. SEWELL
605 LEWIS ST
FRUITLAND PARK FL 34731
US

Mailing Address

C/O STEPHEN G. SEWELL
605 LEWIS ST
FRUITLAND PARK FL 34731
US

APPROVED
AND
FILED

95 JUN 23 AM 9:25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

800001524528

-06/27/95--01080--001

****225.00 ****225.00

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

05/25/1989

3a. Date of Last Report

05/01/1994

4. FEI Number

59-2953921

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for interstate tax under S. 195.032,
Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21 3616 GREGORY RD 26 3616 GREGORY RD

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23 LADY LAKE, FL.

28 LADY LAKE, FL.

Zip

Country

Zip

Country

24 32159

25 LAKE

29 32159

30 LAKE

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

YOAKUM, EDWARD W
605 LEWIS ST
FRUITLAND PARK FL 34731

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83 3616 GREGORY RD.

84 City

LADY LAKE

FL

85 Zip Code

32159

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 constituting)

DATE

12. OFFICERS AND DIRECTORS

TITLE	D
NAME	YOAKUM, EDWARD W.
STREET ADDRESS	605 LEWIS ST.
CITY - ST - ZIP	FRUITLAND PARK FL
TITLE	D
NAME	YOAKUM, SHERYLL L.
STREET ADDRESS	605 LEWIS ST.
CITY - ST - ZIP	FRUITLAND PARK FL
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	☐ Change ☐ Addition
12 NAME	
13 STREET ADDRESS	
14 CITY - ST - ZIP	
21 TITLE	☐ Change ☐ Addition
22 NAME	
23 STREET ADDRESS	
24 CITY - ST - ZIP	
31 TITLE	☐ Change ☐ Addition
32 NAME	
33 STREET ADDRESS	
34 CITY - ST - ZIP	
41 TITLE	☐ Change ☐ Addition
42 NAME	
43 STREET ADDRESS	
44 CITY - ST - ZIP	
51 TITLE	☐ Change ☐ Addition
52 NAME	
53 STREET ADDRESS	
54 CITY - ST - ZIP	
61 TITLE	☐ Change ☐ Addition
62 NAME	
63 STREET ADDRESS	
64 CITY - ST - ZIP	

6/28/95 Mst

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)(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: Edward W. Yoakum EDWARD W. YOAKUM

5-4-95

904-750-4944

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Telephone Number