SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95: $225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $375)

PROFIT CORPORATION ANNUAL REPORT 1995

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 JUN 30 AM 9:32

DOCUMENT # P28248 (3)

1. Corporation Name

WALNUT GROVE AUCTION SALES, INC.

Principal Place of Business
P.O. BOX 226
ROEBUCK SC 29376

Mailing Address
P.O. BOX 226
ROEBUCK SC 29376

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 02/23/1990
3a. Date of Last Report: 04/18/1994

2. Principal Place of Business
21
Suite, Apt. #, etc.
22
City & State
23
Zip
24
Country
25

2a. Mailing Address
26
Suite, Apt. #, etc.
27
City & State
28
Zip
29
Country
30

4. FEI Number: 57-0446843 ☐ 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 taxes for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. **Name and Address of Current Registered Agent**

MC,FAIRLAINE, STERNSTEIN, WILEY & CASSEDY
215 S MONROE ST
SUITE 600
TALLAHASSEE FL 32310-2174

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 ____

12. OFFICERS AND DIRECTORS

TITLE	PD
NAME	HARRISON, LEWIS
STREET ADDRESS	P O BOX 226 N/A
CITY-ST-ZIP	ROEBUCK SC
TITLE	VD
NAME	CHRISTOPHER, WENDELL
STREET ADDRESS	P O BOX 226 N/A
CITY-ST-ZIP	ROEBUCK SC
TITLE	SD
NAME	CHRISTOPHER, MARY JO
STREET ADDRESS	P O BOX 226 N/A
CITY-ST-ZIP	ROEBUCK SC
TITLE	TD
NAME	HARRISON, NANCY
STREET ADDRESS	P O BOX 226 N/A
CITY-ST-ZIP	ROEBUCK SC
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (☐ Change ☐ Addition for each block; all blank)

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)(i), 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: Lewis Harrison (signature and typed or printed name of signing officer or director)

6-27-95 (Date)
803-576-9244 (Daytime Phone)

CR2E034 (3/95)

0100136 PN