

165770


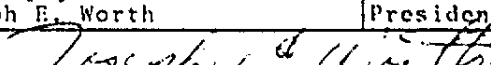
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Annual Report

Filed on 1-30-78

2 pgs.

THE FILING FEE FOR THE 1978 ANNUAL REPORT IS \$10.

STATE OF FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS <b>CORPORATION ANNUAL REPORT</b> <b>1978</b>		 Bruce A. Smathers Secretary of State		FILED MAR 14 1978 TALLAHASSEE, FLORIDA					
THIS REPORT MUST BE ACCOMPANIED BY A \$10 FEE (Form COR 620) 12-4-77									
<b>READ NOTICE AND INSTRUCTIONS ON OTHER SIDE BEFORE MAKING ENTRIES</b>									
1. Name and Address of Corporation Principal Office:  165770 BLACK, CREW AND EIDSSNESS, INC. 7201 N.W. 11TH PLACE GAINESVILLE FLA 32601			2. Enter Change of Address of Corporation Principal Office, P.O. Box Number Alone is NOT Sufficient.  Street Address  P.O. Box No.  City  State  Zip Code						
If above address is incorrect in any way, enter the correct address in Item 2. Include Zip Code.									
3. Date Incorporated or Qualified To Do Business in Florida		07/12/1951		4. Federal Employer Identification Number (FEIN)					
				59-0918189					
5. Date of Last Report 1977									
6. Names and Street Addresses of Each Officer and Director									
Names of Officers and Directors	Title	Director (x)	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State					
WORTH, J.E.	PRES	X	7201 N.W. 11TH PLACE	GAINESVILLE, FL.					
FISHER, M.	V.P.		1600 WESTERN BLVD.	CORVALLIS, OREGON					
CORNELL, H.A.	V.P.		1600 WESTERN BLVD.	CORVALLIS, OREGON					
LASSWELL, S.S.	V.P.		1600 WESTERN BLVD.	CORVALLIS, OREGON					
RICE, A.H.	V.P.	X	1600 WESTERN BLVD.	CORVALLIS, OREGON					
FISHER, M.	SEC		1600 WESTERN BLVD.	CORVALLIS, OREGON					
7. Registered Agent Information  If you wish to change Registered Agent on this form, enter all new information here		<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">                             Name                              BLACK, CHARLES A.                              City, State and Zip Code                              GAINESVILLE, FL 32601                         </td> <td style="width: 50%;">                             Street Address (Do NOT Use P.O. Box Number)                              700 S.E. 3rd St.                         </td> </tr> <tr> <td>                             Name                              Worth, Joseph E.                              City, State and Zip Code                              Gainesville, FL 32601                         </td> <td>                             Street Address (Do NOT Use P.O. Box Number)                              7201 N.W. 11th Place                         </td> </tr> </table>				Name BLACK, CHARLES A. City, State and Zip Code GAINESVILLE, FL 32601	Street Address (Do NOT Use P.O. Box Number) 700 S.E. 3rd St.	Name Worth, Joseph E. City, State and Zip Code Gainesville, FL 32601	Street Address (Do NOT Use P.O. Box Number) 7201 N.W. 11th Place
Name BLACK, CHARLES A. City, State and Zip Code GAINESVILLE, FL 32601	Street Address (Do NOT Use P.O. Box Number) 700 S.E. 3rd St.								
Name Worth, Joseph E. City, State and Zip Code Gainesville, FL 32601	Street Address (Do NOT Use P.O. Box Number) 7201 N.W. 11th Place								
8. An officer of the Corporation must sign this report. This report must be signed by one of the following: The President, Vice President, Secretary, Assistant Secretary or Treasurer or if the Corporation is in the hands of a receiver or trustee, shall be executed on behalf of the Corporation by the receiver or trustee. No Other Title Will Be Accepted. Your Report Will Be Returned If It Does NOT Bear An Authorized Signature.									
I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 307 F.S. I further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effect As If Made Under Oath.									
Typed Name of Signing Officer Joseph E. Worth		Title President		Telephone Number 904/347-2442					
Signature 				Date 1-9-78					

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