

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 125823 (5)

1. Corporation Name

MOOR BROTHERS HOLDING COMPANY



Principal Place of Business

408 PLANTATION ROAD
TALLAHASSEE FL 32303-4206
US

Mailing Address

408 PLANTATION ROAD
TALLAHASSEE FL 32303-4206
US

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

29 30

9. Name and Address of Current Registered Agent

MOOR, WILLIAM L
408 PLANTATION ROAD
TALLAHASSEE FL 32303

3. Date Incorporated or Qualified 02/02/1932	3a. Date of Last Report 06/05/1995
4. FEI Number 59-0366680	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	

10. Name and Address of New Registered Agent

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

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. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature of the person who is authorized to sign this report

Signature of the person who is authorized to sign this report

DATE

12. OFFICERS AND DIRECTORS

TITLE	PD	☐ DELETE
NAME	MOOR, WILLIAM L	
STREET ADDRESS	408 PLANTATION RD.	
CITY-STATE-ZIP	TALLAHASSEE FL	
TITLE	CD	☐ DELETE
NAME	DAVIS, SARAH M.	
STREET ADDRESS	300 CORTEZ ST.	
CITY-STATE-ZIP	TALLAHASSEE FL	
TITLE	STD	☐ DELETE
NAME	MOOR, WILLIAM L, JR.	
STREET ADDRESS	3640 PINE TIP RD	
CITY-STATE-ZIP	TALLAHASSEE FL	
TITLE	VD	☐ DELETE
NAME	BELVIN, CHARLES F.	
STREET ADDRESS	1575 CHRISTOPAL DR	
CITY-STATE-ZIP	TALLAHASSEE FL	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	☐ Change ☐ Addition
2. NAME	
3. STREET ADDRESS	
4. CITY-STATE-ZIP	
5. TITLE	☐ Change ☐ Addition
6. NAME	
7. STREET ADDRESS	
8. CITY-STATE-ZIP	
9. TITLE	☒ Change ☐ Addition
10. NAME	
11. STREET ADDRESS	300 CORTEZ ST
12. CITY-STATE-ZIP	
13. TITLE	☐ Change ☐ Addition
14. NAME	
15. STREET ADDRESS	
16. CITY-STATE-ZIP	
17. TITLE	☐ Change ☐ Addition
18. NAME	
19. STREET ADDRESS	
20. CITY-STATE-ZIP	

14. I do hereby certify that the information supplied with this form is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(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 attached form with an address.

SIGNATURE: *William L. Moor* William L. Moor 3/12/96 (904) 385-2516
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)