FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

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

DOCUMENT # **136571** **(7)**

1. Corporation Name

SUDDATH ENTERPRISES, INC.

Principal Place of Business	Mailing Address
1914 BEACH WAY RD. SUITE 3-O JACKSONVILLE FL 32207-2352 US	1914 BEACH WAY RD. SUITE 3-O JACKSONVILLE FL 32207-2352 US

3. Date Incorporated or Qualified: 02/28/1968
3a. Date of Last Report: 03/10/1995

2. Principal Place of Business
21
Suite, Apt. #, etc.
22
City & State
23
Zip 32207 - 2358 (24) Country (25)

2a. Mailing Address
26
Suite, Apt. #, etc.
27
City & State
28
Zip 32207-2358 (29) Country (30)

4. FEI Number: 59-0468487 ☐ 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

9. Name and Address of Current Registered Agent

PRICE, ROBERT J
5266 HIGHWAY AVE
JACKSONVILLE, FLORIDA
32205

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable) 815 S. MAIN STREET
83
84 City FL 85 32207 - 8157

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 (Sign Here, Typed or Printed Name of Registered Agent and Title if applicable) (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	STD	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	SUDDATH, JULIA A.		1.2 NAME		
STREET ADDRESS	1914 BEACH WAY RD., SUITE 3-O		1.3 STREET ADDRESS		
CITY-ST-ZIP	JACKSONVILLE, FL 0		1.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	SUDDATH, RICHARD L		2.2 NAME		
STREET ADDRESS	1914 BEACH WAY RD., SUITE 3-O		2.3 STREET ADDRESS		
CITY-ST-ZIP	JACKSONVILLE, FL 0		2.4 CITY-ST-ZIP		
TITLE	PD	☐ DELETE	3.1 TITLE		☒ Change ☐ Addition
NAME	SUDDATH, STEPHEN M		3.2 NAME		
STREET ADDRESS	5266 HIGHWAY AVENUE		3.3 STREET ADDRESS	815 S. MAIN ST	
CITY-ST-ZIP	JACKSONVILLE, FL 0		3.4 CITY-ST-ZIP	32207-8157	
TITLE	VD	☐ DELETE	4.1 TITLE		☒ Change ☐ Addition
NAME	STRICKLAND, BARBARA S.		4.2 NAME		
STREET ADDRESS	5266 HIGHWAY AVENUE		4.3 STREET ADDRESS	815 S. MAIN ST	
CITY-ST-ZIP	JACKSONVILLE, FL 0		4.4 CITY-ST-ZIP	32207-8157	
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

CR2E034 (12/95)

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)(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

9043991553

SIGNATURE: Julia A Suddath JULIA A Suddath 2/12/96
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #