

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 #

161058

(3)

1. Corporation Name

COOK LUMBER CO.,INC.



Principal Place of Business

E D COOK
1905 66TH ST
TAMPA FL 33619

Mailing Address

E D COOK
1905 66TH ST
TAMPA FL 33619

3. Date Incorporated or Qualified

04/03/1950

3a. Date of Last Report

04/27/1995

2. Principal Place of Business

21 State, Apt. #, etc.

22 City & State

23 Zip

Country

24

25

2a. Mailing Address

26 State, Apt. #, etc.

27 City & State

28 Zip

Country

29

30

4. FEI Number

59-0615005

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

COOK, G V
1905 66TH ST.
TAMPA FL 33619

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 607.0506, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent and title if applicable

(If Not a Registered Agent, signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

12.1 TITLE

NAME
STREET ADDRESS
CITY, ST, ZIP

12.2 TITLE

NAME
STREET ADDRESS
CITY, ST, ZIP

12.3 TITLE

NAME
STREET ADDRESS
CITY, ST, ZIP

12.4 TITLE

NAME
STREET ADDRESS
CITY, ST, ZIP

12.5 TITLE

NAME
STREET ADDRESS
CITY, ST, ZIP

12.6 TITLE

NAME
STREET ADDRESS
CITY, ST, ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

13.1 TITLE

13.2 NAME
13.3 STREET ADDRESS
13.4 CITY, ST, ZIP

13.5 TITLE

13.6 NAME
13.7 STREET ADDRESS
13.8 CITY, ST, ZIP

13.9 TITLE

13.10 NAME
13.11 STREET ADDRESS
13.12 CITY, ST, ZIP

13.13 TITLE

13.14 NAME
13.15 STREET ADDRESS
13.16 CITY, ST, ZIP

13.17 TITLE

13.18 NAME
13.19 STREET ADDRESS
13.20 CITY, ST, ZIP

13.21 TITLE

13.22 NAME
13.23 STREET ADDRESS
13.24 CITY, ST, ZIP

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 in an attachment with an address.

SIGNATURE:

Signature and typed or printed name of signing officer or director
Joel L. Miller, Vice-President

1-25-96

813-626-1411

Date

Daytime Phone: #

CR2E034 (12/95)