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 # 258496 (9) LOOPDOON CRADDOCK & BORN INC					1 1881/4 HABU BUBU HEND BABU BUBU		
Principal Place of Business 4711 SCENIC HWY PENSACOLA FL 32504		Mading Address 4711 SCENIC HWY PENSACOLA FL 32504					
					3. Date Incorporated or Qualified 05/01/1962	3a. Date of Las	
2. Principal Pla	ice of Business	2a. Mailing Address			4. FEI Number	04/21/	Applied For
26		26			59-0971009	Not Applicable	
Suite, Apt #, etc.		Suite, Apt #, etc	Suite, Apt. #, etc. 		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State		City & State	-1		6. Election Campaign Financing		
		28	¬ ′		Trust Fund Contribution	, , , , , , , , , , , , , , , , , , ,	
Zip]	Country 25	Ζιρ 29	Gounitry 30		8. This corporation has liability for it. Horida Statutes Yes		rs 199.032,
	9. Name and Address of Curre	nt Registered Agent			10. Name and Address of New R	egistered Agent	
			81	Name			
FRANK W. CRADDOCK			82	Street Add	icress (P.O. Box Number is Not Acceptable)		
4711 SCENIC HWY PENSACOLA FL 32504			83				
PENSACULA FL 32304				.			
			84	City		FL 85	Zip Code
IGNATURE .	h, and accept the obligations of, Sec	ta silir tayinde — N	Olf Pagaresi Alic	Pagh if ite to suiz		DATE	
Z. Tle	PD OFFICERS AF	ND DIRECTORS	13.	··· <u> </u>	ADDITIONS/CHANGES TO OFFI	CERS AND DIREC	
AME.	CRADDOCK,F W		1.2 NAMÉ				g
REET ADDRESS	4300 W. FRANCISCO #8		13316811	ADURESS.			
Y-ST-ZIP	PENSACOLA FL		14 C(17 S	F- 24P			
lf.	SO NO AND MARK C					Chan	ge 🔲 Addition
ME REET ADDRESS	NOLAN,MARY C s 2201 SCENIC HWY. #F2		2.2 NAME	AF C 04 05			
Y-ST-ZIP	PENSACOLA FL		23 S19661 24 OTh S				
LE	VO	DELETE	3 1 10 €			[] Chan	ge 🔲 Addition
VE	KRIPPES, HARRIET S.		3.2 NAME				-
REFT ADORESS	4780 VELASQUEZ PLACE		3.3 STHEE	LAODRESS			
Y-ST-ZIP	PENSACOLA FL		3 4 CD - S	* - ZIP		part A	From 1 and
LÉ VIE	DELETE		4 1 THILE			Chan	ge 🔲 Addition
REET ADDRESS			4.2 NAME 4.3 STHLET	AODHESS			
Y-S1-ZIP			44 City - S				
.E	☐ DELETE		5 ! Thick			☐ Chane	ge 🔲 Addition
AE			5.2 NAME				
EE1 AOORESS			5.3 STREET	ADDRESS.			
F-ST-7IP E	T) forth		5.4.C/TY - S 6.1.T/LE	I - Zo:		П с	
ME	☐ OFIETE		6.2 NAME			☐ Chang	ge 🔲 Addition
REET ADDRESS			6.3 SPHET	ADDRESS			
Y-S1-ZiP			64 CiTY - S				
certify that oath; that I	the information indicated on this ann	iual report or supplemental and oration or the receiver or truste	nished and doc nual report is tru se empowered t	sinot qualify i	or the exemption stated in Section 119.0 ate and that my signature shall have the s is report as required by Chapter 607, Flo	same legal effect a	is it made under

SIGNATURE - SIGNATURE AND TYPED OR PRINTED VALUE OF SIGNIFICATION OF PRINTED OR PRINTED

4-22-96 904-430-8314