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FILED
Mar 17 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # 262718

(0)

1. Corporation Name

TROUTMAN ENTERPRISES, INC.

Principal Place of Business

2659 PARK STREET
JACKSONVILLE FL 32204

Mailing Address

2659 PARK STREET
JACKSONVILLE FL 32204-4519



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

3. Date Incorporated or Qualified

09/14/1962

3a. Date of Last Report

03/04/1996

4. FEI Number

59-0983093

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

PARRISH JR, EDWARD S
501 W BAY STREET, SUITE 110
JACKSONVILLE FL

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 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME PD
STREET ADDRESS TROUTMAN, HOWARD P
CITY-ST-ZIP 5423 WHITNEY STREET
JACKSONVILLE FL

TITLE ☐ DELETE

NAME VD
STREET ADDRESS TROUTMAN, TIM
CITY-ST-ZIP 5423 WHITNEY STREET
JACKSONVILLE FL

TITLE ☐ DELETE

NAME STD
STREET ADDRESS TROUTMAN, JEANETTE
CITY-ST-ZIP 5423 WHITNEY STREET
JACKSONVILLE FL

TITLE ☐ DELETE

NAME VD
STREET ADDRESS ENGLISH, VICKI
CITY-ST-ZIP 1939 LAYTON RD
JACKSONVILLE FL

TITLE ☒ DELETE

NAME VD
STREET ADDRESS TROUTMAN, POLLY
CITY-ST-ZIP 3530 BEACH BLVD
JACKSONVILLE FL

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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.

SIGNATURE: H. P. TROUTMAN 3-6-97 388-8537

CR2E034 (9/96)