

**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 # 326204 (5)  
1. Corporation Name  
**BEST VALUE STORES, INC**



Principal Place of Business: 986 S. NOVA ROAD ORMOND BEACH FL 32174  
Mailing Address: 986 S. NOVA ROAD ORMOND BEACH FL 32174

2. Principal Place of Business	2a. Mailing Address	3. Date incorporated or Qualified	3a. Date of Last Report
21	26	02/08/1968	04/12/1995
Suite, Apt. #, etc.	Suite, Apt. #, etc.	4. FEI Number	Applied For
22	27	59-1201121	Not Applicable
City & State	City & State	5. Certificate of Status Desired	\$8.75 Additional Fee Required
23	28	<input type="checkbox"/>	
Zip	Country	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
24	25	29	30
		8. This corporation has liability for intangible tax under s 199.032, Florida Statutes	<input type="checkbox"/> Yes <input type="checkbox"/> No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
DANIEL JR, BEN 101 NORTHWEST THIRD ST OCALA FL 32670	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: \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE: \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD DANIEL, THERESA C <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DANIEL, THERESA C	1.2 NAME	
STREET ADDRESS	101 NW THIRD ST	1.3 STREET ADDRESS	
CITY-ST-ZIP	OCALA FL	1.4 CITY-ST-ZIP	
TITLE	VD KINSEY, CHARLES E SR <input type="checkbox"/> DELETE	2.1 TITLE	VDT <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KINSEY, CHARLES E SR	2.2 NAME	Kinsey, Charles E. Sr
STREET ADDRESS	986 S. NOVA ROAD	2.3 STREET ADDRESS	986 S. Nova Road
CITY-ST-ZIP	ORMOND BEACH FL	2.4 CITY-ST-ZIP	Ormond Beach, FL
TITLE	SD DANIEL JR, BEN <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DANIEL JR, BEN	3.2 NAME	
STREET ADDRESS	101 NW THIRD ST.	3.3 STREET ADDRESS	
CITY-ST-ZIP	OCALA FL	3.4 CITY-ST-ZIP	
TITLE	TD KINSEY, JANET D <input checked="" type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KINSEY, JANET D	4.2 NAME	
STREET ADDRESS	986 S. NOVA ROAD	4.3 STREET ADDRESS	
CITY-ST-ZIP	ORMOND BEACH FL	4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	400001789814 <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	-04/23/96--01011--035
STREET ADDRESS		5.3 STREET ADDRESS	***200.00
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 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 on an attachment with an address.

SIGNATURE: *Theresa C. Daniel* 4/12/96 904/673-3133  
Theresa C. Daniel, President Date Daytime Phone #

CR2E034 (12/95)