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\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

\_\_\_\_\_  
(Business Entity Name)

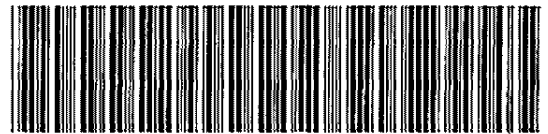
\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_    Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

[Empty rectangular box for special instructions]

Office Use Only



500038002375

DUE DATE ON OR AFTER JANUARY 1 AND ON OR BEFORE JULY 1 OF EACH YEAR

CORPORATION  
ANNUAL REPORT  
**1982**



George Firestone  
Secretary of State

FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS

DO NOT WRITE IN THIS SPACE

Read Notice and Instructions on Other Side Before Making Entries.  
Filing Fee of \$10 Required — Make Checks Payable To: Secretary of State

1 Name and Address of Corporation Principal Office:

366491  
BARRETT, DAFFIN AND CARLAN, INC.  
3100 CAPITAL CIRCLE N.E.  
TALLAHASSEE, FLA 32308

If above address is incorrect in any way, enter the correct address  
in item 2. Include Zip Code.

2 Enter Change of Address of Corporation Principal Office. P.O. Box Number Alone is NOT Sufficient

Street Address

P.O. Box No.

City

State

Zip Code

3 Date incorporated or Qualified To Do Business in Florida 07/01/1970

4 Federal Employer Identification Number (FEIN) 59-1294824

5 Date of Last Report 05/20/1981

6 Names and Street Addresses of Each Officer and Director

Names of Officers and Directors	Title	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State
BARRETT, PEARCE L JR.	P/D	2311 ELLICOTT DRIVE	TALLAHASSEE, FL
DAFFIN, C ERNEST	V/D	BRADFORDVILLE ROAD	TALLAHASSEE, FL
CARLAN, CHARLES H	D	5760 AVENIDA MARINA	PENSACOLA, FL

Registered Agent Information

7 Name and Address of Current Registered Agent

BARRETT, PEARCE L  
2311 ELLICOTT DR  
TALLAHASSEE, FL

8 Name and Address of New Registered Agent

Name  
Street Address (Do NOT Use P.O. Box Number)  
City, State and Zip Code

9 Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, 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 resolution duly adopted by its board of directors on:

SIGNATURE N/A DATE \_\_\_\_\_  
(Registered Agent Accepting Appointment)

\$3.00 additional fee required for Registered Agent changes.

10. See signature restrictions under instructions on reverse side of this form.

I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S. I further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effect As if Made Under Oath.

Signature

C. Ernest Daffin

Title

President

Date

2/25/82

Telephone Number

904 386 1141