

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 # 391678 (0)

1. Corporation Name

R/C SOUTH, INC.



Principal Place of Business

Mailing Address

3702 N PACE BLVD
PENSACOLA FL 32506
US

3702 N PACE BLVD
PENSACOLA FL 32506
US

3. Date Incorporated or Qualified
11/19/1971

3a. Date of Last Report
05/01/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

STILLMAN, TONY
100 KENTUCKY DRIVE
PENSACOLA FL 32505

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, Sections 607.0505, Florida Statutes.

SIGNATURE

Tony Stillman

(If the Registered Agent is not required when registering, delete)

4/26/96

12. OFFICERS AND DIRECTORS

TITLE P
NAME STILLMAN, TONY
STREET ADDRESS 100 KENTUCKY DRIVE
CITY-ST-ZIP PENSACOLA FL

DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE Change Addition

12 NAME

13 STREET ADDRESS

14 CITY-ST-ZIP

15 TITLE

22 NAME

23 STREET ADDRESS

24 CITY-ST-ZIP

25 TITLE

32 NAME

33 STREET ADDRESS

34 CITY-ST-ZIP

35 TITLE

42 NAME

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53 STREET ADDRESS

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62 NAME

63 STREET ADDRESS

64 CITY-ST-ZIP

65 TITLE

66 NAME

67 STREET ADDRESS

68 CITY-ST-ZIP

69 TITLE

70 NAME

71 STREET ADDRESS

72 CITY-ST-ZIP

73 TITLE

74 NAME

75 STREET ADDRESS

76 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)(g), 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:

Tony Stillman

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-26-96

904-434-0909

CR2E034 (12/95)