

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 # 397814 (5)

1. Corporation Name

MSF MANAGEMENT CORP.



Principal Place of Business

3300 S.W. 34TH AVENUE
OCALA FL 32674

Mailing Address

P.O. BOX 11007
ATTN: CORP. TAX
BIRMINGHAM AL

3. Date Incorporated or Qualified
03/21/1972

3a. Date of Last Report
04/05/1995

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

4. FEI Number
59-1418018

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

10. Name and Address of New Registered Agent

REIMER, RODERICK
3300 SW 34TH AVE
SUITE 101
OCALA FL 32674

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 if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P ☐ DELETE
NAME REIMER, RODERICK
STREET ADDRESS 3300 SW 34TH AVE.
CITY-ST-ZIP Ocala FL 32674

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

700001807307
-05/03/96--01086--016
***200.00

TITLE T ☐ DELETE
NAME BEALL, KYLE R
STREET ADDRESS 3300 SW 34TH AVE.
CITY-ST-ZIP Ocala FL 32674

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

Vice President
Kyle R. Beall
1900 5th Ave North
Birmingham, AL 35203

TITLE VPS ☒ DELETE
NAME FLOYDO, MERRITT R
STREET ADDRESS 3300 SW 34TH AVE.
CITY-ST-ZIP Ocala FL 32674

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

Vice President
John Nicholson
1900 5th Ave North
Birmingham, AL 35203

TITLE D ☒ DELETE
NAME CLARDY, JOHN JR. S
STREET ADDRESS 3300 SW 34TH AVE.
CITY-ST-ZIP Ocala FL 32674

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

Treasurer
Lynda Kern
1901 6th Ave North
Birmingham, AL 35289

TITLE VP ☒ DELETE
NAME MUSSELMAN, ROD W
STREET ADDRESS 3300 SW 34TH AVE.
CITY-ST-ZIP Ocala FL 32674

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

Asst. Treasurer
Robert Smith
1901 6th Ave North
Birmingham, AL 35289

TITLE D ☒ DELETE
NAME CLEMONS, W. ELTON
STREET ADDRESS 3300 SW 34TH AVE.
CITY-ST-ZIP Ocala FL 32674

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

Secretary
Bill Caughran
1901 6th Ave North
Birmingham, AL 35289

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: Lynda A. Kern

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/25/96 205-320-7149

Date

Daytime Phone #

CR2E034 (12/95)