

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 # 407248 (4)

1. Corporation Name

J. KINSON COOK, INCORPORATED



Principal Place of Business

5121 W PENSACOLA ST  
TALLAHASSEE FL 32304-9012

Mailing Address

5121 W PENSACOLA ST  
TALLAHASSEE FL 32304-9012

3. Date Incorporated or Qualified

08/21/1972

3a. Date of Last Report

01/19/1995

2. Principal Place of Business

2a. Mailing Address

21 440 CAPITAL CIRCLE, N.W.

26 440 CAPITAL CIRCLE, N.W.

4. FEI Number

59-1425616

Applied For

Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 TALLAHASSEE, FL 32304

27 TALLAHASSEE, FL 32304

5. Certificate of Status Desired

☒

\$8.75 Additional  
Fee Required

City & State

City & State

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

23

28

8. This corporation has liability for intangible tax under s 199.032,  
Florida Statutes ☒ Yes ☐ No

24

Zip

Country

32304 LEON

29

Zip

Country

32304 LEON

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

KUBIK, STEPHEN J  
155 OFFICE PLZ DR  
TALLAHASSEE FL 32301

81 Name

DAVID A. BARRETT

82 Street Address (P.O. Box Number is Not Acceptable)

111 SOUTH MONROE STREET, SUITE 3000

83

P. O. BOX 930 32302-0930

84 City

TALLAHASSEE

FL

85

Zip Code

32301

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

*David A. Barrett*

DAVID A. BARRETT

2-27-96

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP  
PD  
COOK, J. KINSON  
5121 W PENSACOLA ST  
TALLAHASSEE FL

1.1 TITLE ☒ Change ☐ Addition

12 NAME  
13 STREET ADDRESS  
14 CITY-ST-ZIP  
PDS  
COOK, J. KINSON  
440 CAPITAL CIRCLE, N.W.  
TALLAHASSEE, FL 32304

TITLE ☒ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP  
STD  
COOK, L. FINLEY  
5121 W PENSACOLA ST  
TALLAHASSEE FL

2.1 TITLE ☐ Change ☒ Addition

22 NAME  
23 STREET ADDRESS  
24 CITY-ST-ZIP  
DVP  
COOK, DIANA D.  
440 CAPITAL CIRCLE, N.W.  
TALLAHASSEE, FL 32304

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DVP  
COOK, J. KINSON JR.  
5121 W PENSACOLA ST  
TALLAHASSEE FL

3.1 TITLE ☒ Change ☐ Addition

32 NAME  
33 STREET ADDRESS  
34 CITY-ST-ZIP  
DVP  
COOK, J. KINSON JR.  
440 CAPITAL CIRCLE, N.W.  
TALLAHASSEE, FL 32304

TITLE ☒ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DVP  
COOK, SIDNEY L.  
5121 W. PENSACOLA ST.  
TALLAHASSEE FL

4.1 TITLE ☐ Change ☐ Addition

42 NAME  
43 STREET ADDRESS  
44 CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

52 NAME  
53 STREET ADDRESS  
54 CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

62 NAME  
63 STREET ADDRESS  
64 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 recorder 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:

*J. Kinson Cook, Jr.*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

J. KINSON COOK, JR.

2/27/96

904/576-0119

Date

Daytime Phone #

CR2E034 (12/95)