

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 # **412574** (6)

1. Corporation Name
F P CADE & SONS, INC



Principal Place of Business
**543 RAULERSON RD.
P O BOX 33
SEVILLE FL 32190**

Mailing Address
**543 RAULERSON RD.
P O BOX 33
SEVILLE FL 32190**

3. Date Incorporated or Qualified **11/09/1972** 3a. Date of Last Report **03/09/1995**

4. FEI Number **59-0963640** 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

2. Principal Place of Business 2a. Mailing Address

21. Suite, Apt. #, etc. 26. Suite, Apt. #, etc.

22. City & State 27. City & State

23. Zip Country 28. Zip Country

24. 25. 29. 30.

9. Name and Address of Current Registered Agent
**CADE, JOHN PASCO
543 RAULERSON RD
SEVILLE FL 32190**

10. Name and Address of New Registered Agent

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)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD CADE, JOHN P <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CADE, JOHN P	1.2 NAME	
STREET ADDRESS	543 RAULERSON RD	1.3 STREET ADDRESS	
CITY-ST-ZIP	SEVILLE FL 32190	1.4 CITY-ST-ZIP	
TITLE	SD CADE, FORREST E <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CADE, FORREST E	2.2 NAME	
STREET ADDRESS	2111 MCBRIDE RD	2.3 STREET ADDRESS	
CITY-ST-ZIP	SEVILLE FL 32190	2.4 CITY-ST-ZIP	
TITLE	VD CADE, JAMES L <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CADE, JAMES L	3.2 NAME	
STREET ADDRESS	526 CR 305	3.3 STREET ADDRESS	
CITY-ST-ZIP	SEVILLE FL 32190	3.4 CITY-ST-ZIP	
TITLE	TD RIVERS, CHARLES D. <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RIVERS, CHARLES D.	4.2 NAME	
STREET ADDRESS	2136 MCBRIDE RD	4.3 STREET ADDRESS	
CITY-ST-ZIP	SEVILLE FL 32190	4.4 CITY-ST-ZIP	
TITLE	V RIVERS, IRIS CADE <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RIVERS, IRIS CADE	5.2 NAME	
STREET ADDRESS	2136 MCBRIDE RD	5.3 STREET ADDRESS	
CITY-ST-ZIP	SEVILLE FL 32190	5.4 CITY-ST-ZIP	
TITLE	V CADE, VANN P. <input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CADE, VANN P.	6.2 NAME	
STREET ADDRESS	2145 MCBRIDE RD	6.3 STREET ADDRESS	
CITY-ST-ZIP	SEVILLE FL 32190	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: *John P. Cade, John P. Cade* 4/15/96 (904) 749-2119

CR2E034 (12/95)