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PROFIT CORPORATION ANNUAL REPORT

1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **467380** **(2)**

1. Corporation Name

RANKIN & RANKIN, INC.

Principal Place of Business

405 SOUTH DUNCAN AVENUE
CLEARWATER FL 34615

Mailing Address

405 SOUTH DUNCAN AVENUE
CLEARWATER FL 34615

3. Date Incorporated or Qualified: **01/10/1975**

3a. Date of Last Report: **03/13/1995**

4. FEI Number: **59-1564386** [ ] 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 is subject to, for purposes of tangible tax under s. 193.032, Florida Statutes: [X] Yes [ ] No

2. Principal Place of Business
21
Suite, Apt. #, etc.
22
City & State
23
Zip 24 County 25

2a. Mailing Address
26
Suite, Apt. #, etc.
27
City & State
28
Zip 29 County 30

9. Name and Address of Current Registered Agent

RANKIN, ROBERT A.
405 S. DUNCAN AVENUE
CLEARWATER FL 34615

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

12. OFFICERS AND DIRECTORS

TITLE	P	[ ] DELETE
NAME	RANKIN, ROBERT A.	
STREET ADDRESS	2420 SADDLEWOOD LANE	
CITY-ST-ZIP	PALM HARBOR FL	
TITLE	V	[ ] DELETE
NAME	LEE, JACK D.	
STREET ADDRESS	1863 OAKDALE LANE N.	
CITY-ST-ZIP	CLEARWATER FL	
TITLE	ST	[ ] DELETE
NAME	RANKIN, LINDA A.	
STREET ADDRESS	2420 SADDLEWOOD LANE	
CITY-ST-ZIP	PALM HARBOR FL	
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS CHANGES TO OFFICERS AND DIRECTORS

1 TITLE		[ ] Change [ ] Add
2 NAME		
3 STREET ADDRESS		
4 CITY-ST-ZIP		
5 TITLE		[ ] Change [ ] Add
6 NAME		
7 STREET ADDRESS		
8 CITY-ST-ZIP		
9 TITLE		[ ] Change [ ] Add
10 NAME		
11 STREET ADDRESS		
12 CITY-ST-ZIP		
13 TITLE		[ ] Change [ ] Add
14 NAME		
15 STREET ADDRESS		
16 CITY-ST-ZIP		
17 TITLE		[ ] Change [ ] Add
18 NAME		
19 STREET ADDRESS		
20 CITY-ST-ZIP		
21 TITLE		[ ] Change [ ] Add
22 NAME		
23 STREET ADDRESS		
24 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is true, correct, and complete for the purposes of Section 119.07(3)(i), 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 added by an attachment with an asterisk.

SIGNATURE: Robert Rankin 4/16/96 (813) 443-1553
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone Number
Robert Rankin

CR2E034 (12/95)