

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

APPROVED  
AND  
FILED

CORPORATION  
ANNUAL REPORT  
1995



FLORIDA DEPARTMENT OF STATE  
Tallahassee, Florida  
32399-0001

DOCUMENT # 476510

(3)

FLORIDA DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

BIG JOHN FENCE CO., INC.

Principal Office Name

5066 LUCILLE DR  
JACKSONVILLE FL 32205

Mailing Address

5066 LUCILLE DR  
JACKSONVILLE FL 32254  
US

2. Previous Fiscal Year

21. Fiscal Year

22. Fiscal Year

23. Fiscal Year

24. Fiscal Year

2a. Mailing Address

26. Mailing Address

27. Mailing Address

28. Mailing Address

29. Mailing Address

30. Mailing Address

3. Date of Report

05/20/1975

3a. Date of Last Report

01/21/1994

4. Filing Number

59-1602956

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 adopted the provisions of the  
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

DAVIS, JOHN RONALD  
3546 WESTWOOD STREET  
JACKSONVILLE FL 32205

81. Name John R. Davis

82. Street Address (If No Number is Not Applicable)

5066 Lucille Drive

83. Jacksonville - Same

84. City

FL 85. Zip Code 32254

11. Pursuant to the provisions of Sections 605, 606, and 607, 1995 Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent. The 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 responsibilities of Section 607, 1995 Florida Statutes.

SIGNATURE Patricia S. Davis

John R. Davis

April 11, 1995

12. OFFICERS AND DIRECTORS

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS

ST  
NAME  
DAVIS, PATRICIA F  
STREET ADDRESS  
3546 WESTWOOD STREET  
CITY  
JACKSONVILLE, FL 00000

PD  
NAME  
DAVIS, JOHN RONALD  
STREET ADDRESS  
3546 WESTWOOD STREET  
CITY  
JACKSONVILLE, FL 00000

VP  
NAME  
SUTTON, MICHAEL LEE  
STREET ADDRESS  
3547 HYACINTH ST.  
CITY  
JACKSONVILLE FL

VP  
NAME  
DAVIS, MICHAEL W  
STREET ADDRESS  
3518 WESTWOOD STREET  
CITY  
JACKSONVILLE FL

NAME  
STREET ADDRESS  
CITY

NAME  
STREET ADDRESS  
CITY

NAME  
STREET ADDRESS  
CITY

1. NAME  
2. STREET ADDRESS  
3. CITY  
4. NAME  
5. STREET ADDRESS  
6. CITY  
7. NAME  
8. STREET ADDRESS  
9. CITY  
10. NAME  
11. STREET ADDRESS  
12. CITY  
13. NAME  
14. STREET ADDRESS  
15. CITY

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Patricia S. Davis

April 11, 1995