

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # 479724 (7)

1. Corporation Name

BARINEAU AND SONS, INC.



Principal Place of Business

4808 WOODLANE CIRCLE  
TALLAHASSEE FL 32303-6808

Mailing Address

4808 WOODLANE CIRCLE  
TALLAHASSEE FL 32303-6808

3. Date Incorporated or Qualified  
06/26/1975

3a. Date of Last Report  
04/27/1995

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number

59-1604652

Applied For

Not Applicable

22

Suite, Apt. #, etc.

27

Suite, Apt. #, etc.

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

23

City & State

28

City & State

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

24

Zip

Country

29

Zip

Country

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

BROWN, W. KIRK  
313 WILLIAMS ST.  
SUITE 2  
TALLAHASSEE FL

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 PD ☐ DELETE  
NAME BARINEAU, ELBERT L. JR.  
STREET ADDRESS 2744 FARINGDON DRIVE  
CITY-ST-ZIP TALLAHASSEE FL

1.1 TITLE PD ☒ Change ☐ Addition  
1.2 NAME BARINEAU, ELBERT L. JR.  
1.3 STREET ADDRESS 3818 SMOKING THUNDER COURT  
1.4 CITY-ST-ZIP TALLAHASSEE, FLORIDA 32303

TITLE VD ☐ DELETE  
NAME BARINEAU, STANLEY J.  
STREET ADDRESS 1902 E. NELSON CIRCLE  
CITY-ST-ZIP TALLAHASSEE FL

2.1 TITLE VD ☒ Change ☐ Addition  
2.2 NAME BARINEAU, STANLEY J.  
2.3 STREET ADDRESS 7062 BLUEBERRY HILL DRIVE  
2.4 CITY-ST-ZIP TALLAHASSEE, FLORIDA 32303

TITLE STD ☐ DELETE  
NAME BARINEAU, PATRICIA A.  
STREET ADDRESS 5019 VALLEY FARM ROAD  
CITY-ST-ZIP TALLAHASSEE FL

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

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
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:

PATRICIA A. BARINEAU

Patricia A. Barineau 2/07/96 904-562-1125

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (12/95)