FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAR 28 PM 3:19

DOCUMENT # **538049** **(8)**

1. Corporation Name

SALLY INDUSTRIES, INC.

Principal Place of Business	Mailing Address
803 PRICE STREET ATTN: HOWARD KELLEY, JR. JACKSONVILLE FL 32204	803 PRICE STREET ATTN: HOWARD KELLEY, JR. JACKSONVILLE FL 32204

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **06/27/1977**
3a. Date of Last Report: **02/10/1994**

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

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

4. FEI Number: **59-1788625** ☐ 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

9. Name and Address of Current Registered Agent

SMITH & HULSEY
1800 FIRST UNION NATIONAL BANK TOWER
225 WATER STREET
JACKSONVILLE FL 32202

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 _____ DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	~~D~~	11 TITLE	VP	☒ Change ☐ Addition
NAME	~~TURNAGE JR., THOMAS L~~	12 NAME	PURSER, KENT L.	
STREET ADDRESS	~~4114 HERSCHEL ST STE 100~~	13 STREET ADDRESS	803 PRICE ST.	
CITY ST ZIP	~~JACKSONVILLE FL 32210~~	14 CITY ST ZIP	JACKSONVILLE, FL 32204	
TITLE	D	21 TITLE		☐ Change ☐ Addition
NAME	MARGOL, WILBUR	22 NAME		
STREET ADDRESS	736 S GRANADA BLVD	23 STREET ADDRESS		
CITY ST ZIP	JACKSONVILLE FL 32207	24 CITY ST ZIP		
TITLE	PD	31 TITLE		☐ Change ☐ Addition
NAME	KELLEY, HOWARD W. JR.	32 NAME		
STREET ADDRESS	803 PRICE STREET	33 STREET ADDRESS		
CITY ST ZIP	JACKSONVILLE FL 32204	34 CITY ST ZIP		
TITLE	~~D~~	41 TITLE		☒ Change ☒ Addition
NAME	~~THOMAS, JOHN N JR~~	42 NAME	Delete	
STREET ADDRESS	~~5775 PEACHTREE DNWDY RD~~	43 STREET ADDRESS		
CITY ST ZIP	~~ATLANTA GA 30342~~	44 CITY ST ZIP		
TITLE	CVS	51 TITLE		☐ Change ☐ Addition
NAME	WOOD, JOHN H.	52 NAME		
STREET ADDRESS	803 PRICE STREET	53 STREET ADDRESS		
CITY ST ZIP	JACKSONVILLE FL 32204	54 CITY ST ZIP		
TITLE	D	61 TITLE		☐ Change ☐ Addition
NAME	FOSTER, JR., RONALD H	62 NAME		
STREET ADDRESS	2900 HARTLEY RD	63 STREET ADDRESS		
CITY ST ZIP	JACKSONVILLE FL	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)(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 on an attachment with an address.

SIGNATURE: _____ Kent L. Purser 15 Mar 95 904 353 5051
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0014559 CP