FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

Mailing Address

JAX FL 32204

745 W FORSYTH ST

ATTN: HOWARD KELLEY, JR.

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # 538049

1. Corporation Name

Principal Place of Business

ATTN: HOWARD KELLEY, JR.

745 W FORSYTH ST

JAX FL 32204

SALLY INDUSTRIES, INC.

					06/27/1977			
2. Principal Pla	ace of Business	2a. Mailing Address			4. FEI Number		Ш	Applied For
1		26			59-1788625			Not Applicable
Suite, Apt. i	e, Apt. #, etc. Suite, Apt. #, etc.				5. Certifcate of Status Desired	×	•	5 Additional Required
City & State	9	City & State			Election Campaign Financing Trust Fund Contribution			May Be ed to Fees
Zip	Country	Zip	Country		8. This corporation owes the curr	ent vear Inta	ingible	
	25	29 3	¬ ·		Personal Property Tax.	,	Yes	□No
24]	9. Name and Address of Current	<u></u>	• <u> </u>		10. Name and Address of New F	Registered /	gent	
	5, Italie and Addiese of Content		81	Name				
SMITH & HULSEY								
1800 FIRST UNION NATIONAL BANK TOWER				82 Street Address (P.O. Box Number is Not Acceptable)				
225 WATER STREET			83					
JACKSONVILLE FL 32202							<u> </u>	
JACKSONVILLE I E SZZOZ			84	City		C I	85 Z	ip Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the				l		<u> </u>	1	ita saniatarad
11. Pursuant	to the provisions of Sections 607.0502 egistered agent, or both, in the State of	and 607.1508, Florida Statutes	, the above	e-named con the comorati	poration submits this statement for the ion's board of directors. I hereby accer	purpose of the appoin	:nanging itment as	registered
agent, Lar	m familiar with, and accept the obligati	ons of, Section 607.0505, Florid	ia Statutes			,,		_
SIGNATURE								
PIGUNIONE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE: R	tegistered Ager	nt signature requir	ed when reinstating)	DATE		
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OF	FICERS AN		
TITLE	TV .	_ DELETE	1,1 TITLE				Chang	ge
NAME	COLEMAN, WILLIAM		1.2 NAME					
STREET ADDRESS	745 W FORSYTH ST		1.3 STREET	T ADDRESS	•			
CITY-ST-ZIP	JAX FL 32204		1.4 CITY-S	T-ZIP				
TITLE	D	☐ DELETE 2.1					Chang	ge 🔲 Additio
NAME	MARGOL, WILBUR		2.2 NAME					
STREET ADDRESS	736 S GRANADA BLVD		23 STREE	TADDRESS				
	JACKSONVILLE FL 32207		2. 4 CITY-S					
CITY-ST-ZIP			3.1 TITLE	J1 24			[] Chang	ge 🗌 Additio
TITLE			3.2 NAME					
NAME	KELLEY, HOWARD W. JR.		1	T ADDRESS				
STREET ADDRESS	745 W FORSYTH ST		1	ì				
CITY-ST-ZIP	JACKSONVILLE FL 32204	☐ DELETE	3.4. CITY-S	ST-ZIP			Chan	ge Additio
TITLE	CD	☐ DETE IE	4.1 TITLE					<u></u>
NAME ,	WOOD, JOHN H.		4.2 NAME					
STREET ADDRESS	745 W FORSYTH ST			TADDRESS				
CITY-ST-ZIP	JACKSONVILLE FL 32204		4.4 CITY-S	IT-ZIP			☐ Chan	ge
TITLE	D	☐ OELETÉ	5.1 TITLE					ac □ ∨ooin
NAME	FOSTER, JR., RONALD H		5.2 NAME					
STREET ADDRESS	2900 HARTLEY RD			T ADDRESS				
CITY-ST-ZIP	JACKSONVILLE FL .		5.4 CITY-S	T- ZIP				
TITLE	D	☐ DELETE	6.1 TITLE				Chan	ge 🗌 Additio
NAME	HOUSTON, CLANCY		6.2 NAME		•			
STREET ADDRESS	225 WATER ST. STE 1235		6.3 STREE	T ADDRESS				
CITY OT 7ID	JACKSONVILLE FI		6.4 CITY-S					
		h this filing does not qualify for t	the exempl	ion stated in	Section 119.07(3)(i), Florida Statutes.	I further cer	tify that th	he information
indicated officer or Block 12	on this annual report or supplemental director of the corporation or the recei or Block 13 if changed, or on an attact	annual report is true and accura or trustee empowered to ex- ment with an address, with all of	ate and that ecute this rother like e	at my signatu report as requ mpowered.	re shall have the same legal effect as uired by Chapter 607, Florida Statutes	r made under; and that m	er oath; tr y name a	nat I am an appears in

SIGNATURE:

FILED

Jan 25, 1999 8:00am

Secretary of State

DO NOT WRITE IN THIS SPACE

3. Date incorporated or Qualifed

01-25-1999 90009 046 ***158.75