

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # 604018 (2)

1. Corporation Name
HARRISON, KENNON AND ASSOCIATES, P.A.



Principal Place of Business Mailing Address
1012 WEST 11TH STREET 1012 WEST 11TH STREET
PANAMA CITY FL 32401 PANAMA CITY FL 32401

2. Principal Place of Business 2a. Mailing Address
 21 State, Apt. #, etc. 26 State, Apt. #, etc.
 22 City & State 27 City & State
 23 Zip Country 28 Zip Country
 24 25 29 30

3. Date Incorporated or Qualified: **12/27/1972** 3a. Date of Last Report: **03/31/1995**
 4. FEIN Number: **59-1466656** 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
 10. Name and Address of New Registered Agent

9. Name and Address of Current Registered Agent
HARRISON, FRANKLIN R.
406 MAGNOLIA AVENUE
PANAMA CITY FL 32401
 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 Section 607.02 and 607.03A, 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 607.03, Florida Statutes.

SIGNATURE _____ TITLE _____ DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	NAME	TITLE	NAME
PD	HARRISON, W.G.	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
1012 WEST 11TH STREET	1012 WEST 11TH STREET	13 STREET ADDRESS	
PANAMA CITY FL	PANAMA CITY FL	14 CITY, ST., ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
VD	KENNON, J. BRANCH	21 TITLE	22 NAME
1012 WEST 11TH STREET	1012 WEST 11TH STREET	23 STREET ADDRESS	24 CITY, ST., ZIP
PANAMA CITY FL	PANAMA CITY FL	25 CITY, ST., ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
S	KENNON, J. BRANCH	31 TITLE	32 NAME
1012 WEST 11TH STREET	1012 WEST 11TH STREET	33 STREET ADDRESS	34 CITY, ST., ZIP
PANAMA CITY FL	PANAMA CITY FL	35 CITY, ST., ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
T	HARRISON, W.G.	41 TITLE	42 NAME
1012 WEST 11TH STREET	1012 WEST 11TH STREET	43 STREET ADDRESS	44 CITY, ST., ZIP
PANAMA CITY FL	PANAMA CITY FL	45 CITY, ST., ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
D	HARRISON, FRANKLIN R.	51 TITLE	52 NAME
406 MAGNOLIA AVENUE	406 MAGNOLIA AVENUE	53 STREET ADDRESS	54 CITY, ST., ZIP
PANAMA CITY FL	PANAMA CITY FL	55 CITY, ST., ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
		61 TITLE	62 NAME
		63 STREET ADDRESS	64 CITY, ST., ZIP

14. I do hereby certify that the information supplied with this filing is voluntary, true and correct and necessary for the event stated in Section 119.07(3)(g), Florida Statutes. I further certify that the information indicated on this filing in part or in whole, if supplemented, annual report is true and correct and that my signature shall have the same legal effect as if made under oath, that I am an officer or director of this 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 as an addendum with the address.

SIGNATURE: *W. G. Harrison* 4/10/96 904-763-6782
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)