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

APPROVED AND FILED

95 MAY -1 AM 4:26

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 605252 (6)

CANNIFF, INC.

Principal Place of Business: ~~RT. 3, BOX 107-G~~ CHIEFLND FL 32626

Mailing Address: ~~RT. 3, BOX 107-G~~ 12380 Highway 19 CHIEFLND FL 32626

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 12/29/1978

3a. Date of Last Report: 05/01/1994

2. Principal Place of Business: 21 12380 Highway 19

2a. Mailing Address: 26 12380 HIGHWAY 19

4. FEI Number: 59-1866500 — Applied For / Not Applicable

Suite, Apt. #, etc.: 22

Suite, Apt. #, etc.: 27

5. Certificate of Status Desired: ☐ $8.75 Additional Fee Required

City & State: 23

City & State: 28

6. Election Campaign Financing Trust Fund Contribution: ☐ $5.00 May Be Added to Fees

24 25 29 30

8. This corporation has indemnification as under S. 607.0850 Florida Statutes: ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

CANNIFF, ROBERT
~~RT. 3, BOX 107-G~~
CHIEFLND FL 32626

10. Name and Address of New Registered Agent

81 Name:

82 Street Address (P.O. Box Number is Not Acceptable): 12380 Highway 19

83

84 City: CHIEFLAND, FL. FL 85 Zip Code: 32626

11. Pursuant to the provisions of Section 607.0501, and/or 608, Florida Statutes, the above named corporation submits the 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 I accept the obligations of such a registered agent, Florida Statutes.

SIGNATURE: (Registered Agent signature required for 11) DATE

12. OFFICERS AND DIRECTORS

TITLE: PS
NAME: CANNIFF, ROBERT B
~~RT. 3, BOX 107-G~~
CHIEFLND FL 32626

13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN 12

☒ Change ☐ Addition

TITLE: N/A
NAME: CANNIFF ROBERT B.
STREET ADDRESS: 12380 HIGHWAY 19
CITY, ST, ZIP: Chiefland, Fl. 32626

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

14. I declare, under penalty of perjury, that the information supplied with this report is accurately transcribed and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information contained in the annual report or supplemental 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 the corporation or the receiver or trustee empowered to execute the 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: Robert B. CANNIFF Robert B. Canniff 10 Jan. 95
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE

904 493-1398
TELEPHONE NUMBER

0412536 FP