

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

**CORPORATION
ANNUAL REPORT
1995**



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

DOCUMENT # 637107

(4)

1. Corporation Name

TALLAHASSEE MACK SALES, INC.

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS**

95 JAN 13 AM 10:17

Principal Place of Business

**4740 BLOUNTSTOWN HIGHWAY
TALLAHASSEE FL 32304**

Mailing Address

**4740 BLOUNTSTOWN HIGHWAY
TALLAHASSEE FL 32304**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

09/21/1979

3a. Date of Last Report

01/20/1994

4. FEI Number

59-1941540

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing

☐

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

21. Suite, Apt. #, etc.

22. City & State

24. Zip

Country

2b. Mailing Address

26. Suite, Apt. #, etc.

27. City & State

29. Zip

Country

9. Name and Address of Current Registered Agent

**FARRAN, BILLY W.
4740 BLOUNTSTOWN HIGHWAY
TALLAHASSEE FL 32304**

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

Billy W. Farran, Vice-President **BILLY W. FARRAN**

01-11-95

(Signature of person appointed as registered agent and his or her agent)

(Signature of registered agent required when mandatory)

(Date)

12. OFFICERS AND DIRECTORS

TITLE **PS**
NAME **THOMAS, MARK A.**
STREET ADDRESS **4740 BLOUNTSTOWN HIGHWAY**
CITY ST ZIP **TALLAHASSEE FL**

TITLE **VPT**
NAME **FARRAN, BILLY W.**
STREET ADDRESS **4740 BLOUNTSTOWN HWY.**
CITY ST ZIP **TALLAHASSEE FL**

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

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NAME
STREET ADDRESS
CITY ST ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY ST ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY ST ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY ST ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY ST ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 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 (97.384), 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:

Billy W. Farran, Vice-President
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01-11-95

Date

904.5758655

Signature Number