

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # 639284 (9)

1. Corporation Name

S.G. WEST & SONS, INC.



Principal Place of Business

RT 16 BOX 5200  
P.O. BOX 3827  
TALLAHASSEE FL 32310

Mailing Address

RT 16 BOX 5200  
P.O. BOX 3827  
TALLAHASSEE FL 32310

3. Date Incorporated or Qualified  
10/10/1979

3a. Date of Last Report  
01/25/1995

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 922 Lafayette Ct

27 Suite, Apt. #, etc.

28 Tallahassee FL

29 Zip Country

30 32301 Leon

4. FEI Number

59-1950571

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

9. Name and Address of Current Registered Agent

LINTON, SARAH G. WEST  
ROUTE 16, BOX 5200 SPRINGHILL ROAD  
TALLAHASSEE FL 32310

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83 8401 Springhill Road

84 City

Tallahassee FL

85 Zip Code

32310

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

Signature, typed or printed name of registered agent (and if not applicable, the

12. Registered Agent Signature (and if not applicable, the

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

P  
LINTON, SARAH G. WEST  
RT 16 BOX 5200  
TALLAHASSEE, FL 00000

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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

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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)(k), 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:

*S. G. West* P. 2000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/15/96 (904) 656-4744

CR2E034 (12/95)