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Jan 16 1997 8:00am  
Secretary of State



PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # 652132 (2)

1. Corporation Name  
P P & F, INC.

Principal Place of Business  
7981 - 10TH AVE SO  
PO BOX 47025 (33743-7025)  
ST. PETERSBURG FL 33707

Mailing Address  
7981 - 10TH AVE SO  
PO BOX 47025 (33743-7025)  
ST. PETERSBURG FL 33707-2703

3. Date Incorporated or Qualified 01/14/1980	3a. Date of Last Report 01/22/1996
4. FEI Number 59-1970309	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

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

9. Name and Address of Current Registered Agent  
PATTERSON, GEORGE L, SR.  
7981-10TH AVE, S.  
ST. PETERSBURG FL 33707

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
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 \_\_\_\_\_  
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS	
TITLE	DP
NAME	PICKLE, H E
STREET ADDRESS	5850 S W 45TH ST
CITY-ST-ZIP	FT LAUDERDALE, FL 00000
TITLE	DVP
NAME	FRASER, LEWIS L
STREET ADDRESS	6300-26TH AVE, N.
CITY-ST-ZIP	ST PETERSBURG, FL 00000
TITLE	DSTVP
NAME	PATTERSON, GEORGE L, SR.
STREET ADDRESS	7981 - 10TH AVE SO
CITY-ST-ZIP	ST PETERSBURG, FL 00000
TITLE	AVP
NAME	PATTERSON, GREGORY L
STREET ADDRESS	1422 53RD AVE W
CITY-ST-ZIP	PALMETTO FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITION, DELETION, OR CHANGE TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	DP
1.2 NAME	PICKLE, H E
1.3 STREET ADDRESS	5850 S W 45TH ST
1.4 CITY-ST-ZIP	FT LAUDERDALE, FL 33314
2.1 TITLE	DVP
2.2 NAME	FRASER, LEWIS L
2.3 STREET ADDRESS	6300-26TH AVE, N.
2.4 CITY-ST-ZIP	ST PETERSBURG, FL 33710
3.1 TITLE	DSTVP
3.2 NAME	PATTERSON, GEORGE L, SR.
3.3 STREET ADDRESS	7981 - 10TH AVE SO
3.4 CITY-ST-ZIP	ST PETERSBURG, FL 33707
4.1 TITLE	
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied in this 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, unchanged, or on an attachment with an address.

SIGNATURE: George L. Patterson, Sr.  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
1/14/97 813/ 345-3145  
Date Daytime Phone #