PF	NOW: FILING FEE A	AFTER MAY 1 IS \$2 FLORIDA DEPARTMEN Sandra B. Mort	IT OF STATE		
ANNUA	AL REPORT	Secretary of S DIVISION OF CORPO	itate		
DOCUM 1. Corporation N	IENT # 68196	5 (0)			
ABCA,	, INC.				
Principal Place o	of Business	Mailing Address	,,,		
225 WATER ST., 11TH FLOOR P. O. BOX 2080 JACKSONVILLE FL 32231-0010				Date incorporated or Qualified 3.	a. Date of Last Report
AMONOOMAII	LLE 11 deed with			08/13/1980	05/01/1995
2. Principal Plac	ce of Business	2a. Mailing Address		4, FEI Number 59-1635082	Applied For Not Applicable
Suite, Apt #,	etc.	Suite, Apt. #, etc		5. Certificate of Status Desired	\$8.75 Additional Fee Required
22		27		6. Election Campaign Financing	\$5.00 May Be
City & State		City & State		Trust Fund Contribution	Added to Fees
Z(p	Country	Zip	Country	8. This corporation has liability for inta Florida Statutes Yes [ngible tax under si 199.032, ∃No
24	9. Name and Address of Curren	29 30		10. Name and Address of New Reg	
THE PRENTICE-HALL CORPORATION SYSTEM INC. 1201 HAYS STREET SUITE 105 TALLAHASSEE FL 32301			82 Street Ad 83 84 City	dress (P.O. Box Number is Not Acceptable)	85 Zip Code
11. Pursuant to or registere familiar witi		ion 607.0505, Florida Statutes.	,	poration submits this statement for the purpo pard of directors. I hereby accept the appoin	
SIGNATURE	Signeture, byte dior print a name of regelered age:		jedened Apent signature red 13.	ADDITIONS/CHANGES TO OFFICE	ERS AND DIRECTORS IN 12
12.		D DIRECTORS DELETE	1 1 T.TLE	D	Change Addition
TITLE NAME	S MILLER, JERRY M JR	_		THOMPSON, G. KENNEDY	·
STREET ADDRESS	301 S COLLEGE ST		13 STREET ADORESS 14 CHTY-ST-ZIP	225 WATER STREET JACKSONVILLE, FL 3220	2
CHY-S1-ZIP	CHARLOTTE NC	X DELETE	2 1 IIILE	Incksom IIII.	Change Addition
NAME	HODNETT, BYRON E.	, ,	2.2 NAME		
STREET ADDRESS	225 WATER ST.		2.3 STREET ADDRESS		
CITY - ST - ZIP	JACKSONVILLE FL	☐ DELETE	24 C TY - S1 - ZIP 3 1 HTLE	***************************************	Change Addition
TITLE	WERTZ, LARRY J.		3 2 NAME		
1	MERCIE, LANGE V.		3.3 STREET ADORESS		
NAME	225 WATER ST.		1		
	225 WATER ST. JACKSONVILLE FL	E3 Doctor	3.4 CITY - \$1-7iP		Change Addition
NAME STREET ADDRESS CITY-ST-ZIP TITLE	JACKSONVILLE FL D	☐ DELETE	4. 1 111 F	::::::::::::::::::::::::::::::::::::::	<u> </u>
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	JACKSONVILLE FL D MITCHELL, JOHN A., III	☐ DELE1E		20000181 -05/13/96010	<u> </u>
NAME STREET ADDRESS CITY+ST-ZIP TITLE NAME STREET ADDRESS	JACKSONVILLE FL D MITCHELL, JOHN A., III 225 WATER ST.	_	4, 1 111LF 4 2 NAME	20000181 -05/13/96010 ***208.75	7282 ⁾³⁰¹⁸
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	JACKSONVILLE FL D MITCHELL, JOHN A., III	□ DELETE	4.1 HTLF 4.2 NAME 4.3 STREET ADDRESS 4.4 CHY-ST ZIP 5.1 HTLE	20000181 -05/13/96010 ***208,75	
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	JACKSONVILLE FL D MITCHELL, JOHN A., III 225 WATER ST.	_	4.1 HILF 4.2 NAME 4.3 STREET ADDRESS 4.4 CHY-ST-ZIP 5.1 HILE 5.2 NAME	20000181 -05/13/96010 ***208.75	7282 ⁾³⁰¹⁸
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	JACKSONVILLE FL D MITCHELL, JOHN A., III 225 WATER ST. JACKSONVILLE FL	_	4.1 HTLF 4.2 NAME 4.3 STREET ADDRESS 4.4 CHY-ST ZIP 5.1 HTLE	20000181 -05/13/96010 ***208.75	7282 ⁾³⁰¹⁸

64 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 119.07(3)fk). 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 cath; 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:

Larry J. Wertz 4/29/96 (904)361-3651

District Photos 8

6.2 NAME

63 STREET ADDRESS

6.4 City - ST - 21⁰

NAME

STREET ADDRESS

2. 21

22

23

CR2E034 (12/95)