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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

1996 DIVISION OF CORPORATIONS **DOCUMENT #** 689129 (5)A.M.F.C., INC. Principal Place of Business Mailing Address 17621 OAK CREEK RD 17621 OAK CREEK RD **ALVA FL 33920 ALVA FL 33920** Date Incorporated or Qualified 09/25/1980 3a. Date of Last Report 04/21/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 59-2037873 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zφ Country Zip Country 8. This corporation has liability for intangible tax under s 199.032, 24 25 29 30 Florida Statutes Yes No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent R1 Name HALLAM, RICHARD M. 82 Street Address (P.O. Box Number is Not Acceptable) 17621 OAK CREEK RD. ALVA FL 33920 83 84 City 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 familiar with, and accept the obligations of Section fig. 0505, Florida Statutes.

SIGNATURE

SIGNATU and title if applicable (NOTE: Rugistered Agont signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DELETE 1 1 THE Change Addition HALLAM, RICHARD M NAME 1.2 NAME 17621 OAK CREEK RD. STREET ADDRESS 1.3 STREET ADDRESS ALVA FL CITY-ST-ZIP 1.4 CITY-ST-ZIP TITLE DELETE 2 1 TITLE Change ■ Addition HALLAM, RICHARD M NAME 22 NAME 17621 OAK CREEK RD. STREET ADDRESS 2.3 STREET ADDRESS ALVA FL C:TY-ST-ZIP 24 CITY - ST - ZIP TITLE DELETE 3 1 TITLE ☐ Change ☐ Addition HALLAM, CLAUDETTE P. NAME 3.2 NAME 17621 OAK CREEK RD. STREET ADDRESS 3.3. STREET ADDRESS ALVA FL CITY-ST-7IP 3 4 CITY - ST - ZIP TITLE DELETE 4 1 TITLE Change ☐ Addition LAFFENTY, BONNIE H. NAME 4.2 NAME 17621 OAK CREEK RD. STREET ADDRESS 43 STREET ADDRESS ALVA FL CITY-SI-2IP 44 CITY-ST-ZIP THILE DELETE 5 1 TITLE ☐ Change Addition NAME 5 2 NAME STREEL ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP TITLE DELETE 6 1 TITLE Change ☐ Addition NAME 62 NAME STREET ADDRESS 6.3 STREET ADDRESS

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 certify 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 it changed, on an attachment with an address

6.4 CITY - ST- ZIP

SIGNATURE:

CR2E034 (12/95)