

FILE NOW: FILING FEE IS \$61.25

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Jan 21 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 709716 (5)

1. Corporation Name
TALLACON, INC.



Principal Place of Business 809 N. GADSDEN STREET TALLAHASSEE FL 32303-6315	Mailing Address 809 N. GADSDEN STREET TALLAHASSEE FL 32303-6315
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3. Date Incorporated or Qualified 10/05/1965		3a. Date of Last Report 02/14/1996	
2. Principal Place of Business 21		2a. Mailing Address 26	
Suite, Apt. #, etc. 22		Suite, Apt. #, etc. 27	
City & State 23		City & State 28	
Zip 24	Country 25	Zip 29	Country 30
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 checked="" type="checkbox"/> No			

9. Name and Address of Current Registered Agent SOUTHERLAND, H.P. 1571 CLIFFORD HILL RD TALLAHASSEE FL 32308		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 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	D BUDZYNA, ED	1.2 NAME	
STREET ADDRESS	1108 CUERNO ST	1.3 STREET ADDRESS	
CITY-ST-ZIP	TALLAHASSEE FL	1.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	D MAWHINNEY, BURREL	2.2 NAME	
STREET ADDRESS	2321 ARMISTEAD RD	2.3 STREET ADDRESS	
CITY-ST-ZIP	TALLA, FL 00000	2.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	D PARTIN, JOHN	3.2 NAME	
STREET ADDRESS	2809 LASSWADE DR	3.3 STREET ADDRESS	
CITY-ST-ZIP	TALLA, FL 00000	3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	D EUBANKS, ED	4.2 NAME	
STREET ADDRESS	4709 FLORERWOOD DR	4.3 STREET ADDRESS	
CITY-ST-ZIP	TALLA, FL 00000	4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	D SMYLY, MARGARET	5.2 NAME	
STREET ADDRESS	1108 CUERNO ST.	5.3 STREET ADDRESS	
CITY-ST-ZIP	TALLA, FL 00000	5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	STD SOUTHERLAND, H.P.	6.2 NAME	
STREET ADDRESS	1571 CLIFFORD HILL RD	6.3 STREET ADDRESS	
CITY-ST-ZIP	TALLA, FL 0	6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: **H.P. SOUTHERLAND** *H.P. Southerland* **JAN. 11, 1997 (904) 656-2943**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (9/96)