

**FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # 717377 (6)

1. Corporation Name

ALCO-HALL, INC.



Principal Place of Business: 1215 LAKE DRIVE COCOA FL 32922  
Mailing Address: 1215 LAKE DRIVE COCOA FL 32922

3. Date Incorporated or Qualified: 10/16/1969  
3a. Date of Last Report: 04/12/1995

2. Principal Place of Business (21-24) and 2a. Mailing Address (25-30) fields with sub-headers for Suite, City & State, and Zip/Country.

4. FEI Number: 23-7061960  
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: MELTON, JONATHAN, 1215 LAKE DR, COCOA FL 32922  
10. Name and Address of New Registered Agent (81-85) fields.

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: Jonathan M. Melton (with handwritten signature and date 3/27/96)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE: ST NAME: VAN LEAR, JACK STREET ADDRESS: 35 CARLETON ST. CITY-ST-ZIP: COCOA FL	<input type="checkbox"/> DELETE	11 TITLE: <del>Executive Director</del> 12 NAME: Jonathan Melton 13 STREET ADDRESS: 1215 Lake Dr 14 CITY-ST-ZIP: COCOA, FL. 32922	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE: D NAME: IVEY, JUDY STREET ADDRESS: 275 EAGLE LANE CITY-ST-ZIP: MERRITT ISLAND FL	<input type="checkbox"/> DELETE	21 TITLE: Director 22 NAME: James Therial 23 STREET ADDRESS: 96 Willard St. 24 CITY-ST-ZIP: COCOA, FL. 32922	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE: ST NAME: PIRTLE, DOROTHY STREET ADDRESS: 430 BREVARD AVE. CITY-ST-ZIP: COCOA FL	<input checked="" type="checkbox"/> DELETE	31 TITLE: Director 32 NAME: Steve Ellis 33 STREET ADDRESS: 535 Delannoy Av. 34 CITY-ST-ZIP: COCOA, FL. 32922	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE: D NAME: PATRICK, KENNY STREET ADDRESS: 5493 FLINT RD. CITY-ST-ZIP: COCOA FL	<input type="checkbox"/> DELETE	4.1 TITLE: 4.2 NAME: 4.3 STREET ADDRESS: 4.4 CITY-ST-ZIP:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: V NAME: COREY, MIKE STREET ADDRESS: 1212 LAKE DE. CITY-ST-ZIP: COCOA FL	<input type="checkbox"/> DELETE	5.1 TITLE: 5.2 NAME: 5.3 STREET ADDRESS: 5.4 CITY-ST-ZIP:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: P NAME: WENNER, LEE STREET ADDRESS: 1060 MATADOR DR. CITY-ST-ZIP: ROCKLEDGE FL	<input type="checkbox"/> DELETE	6.1 TITLE: 6.2 NAME: 6.3 STREET ADDRESS: 6.4 CITY-ST-ZIP:	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Lee Wenner (with handwritten signature and date 3-27-96, phone 632-5758)

CRE037 (12/95)