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Jan 27 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 765225 (8)

1. Corporation Name

FLO - ALA LOCKSMITHS ASSOCIATION, INC.

Principal Place of Business

Mailing Address

C/O MORRIS LOCK & SAFE
906 W. MICHIGAN AVE
PENSACOLA FL 32505
US

C/O MORRIS. BILL
906 W. MICHIGAN AVE
PENSACOLA FL 32505
US

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

09/28/1982

4. FEI Number

59-1977194

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

7. Is this nonprofit corporation a homeowners association?

☐ Yes

☒ No

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.

☐ Yes

☒ No

10. Name and Address of New Registered Agent

MORRIS, WILLIAM L
906 W. MICHIGAN AVE.
PENSACOLA FL 32505

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstalling)

DATE

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP

P
MOORE, KENNETH
4664 HIGHWAY 90
MARIANNA FL

TITLE NAME STREET ADDRESS CITY-ST-ZIP

ST
MORRIS, WILLIAM L JR.
906 W. MICHIGAN AVE.
PENSACOLA FL

TITLE NAME STREET ADDRESS CITY-ST-ZIP

VP
TATE, THOMAS
1495 CREIGHTON ROAD
PENSACOLA FL

TITLE NAME STREET ADDRESS CITY-ST-ZIP

GA
HAYES, CHARLES
5507 HARVEY ST
CALLAWAY FL

TITLE NAME STREET ADDRESS CITY-ST-ZIP

D
JOHNSON, DANA
16208 SKY AVE
PANAMA CITY BCH FL

TITLE NAME STREET ADDRESS CITY-ST-ZIP

D
MARSHALL, BEN
6 COMET ST SW
FT WALTON BCH FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP

2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP

3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP

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 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:

WILLIAM L. MORRIS

1-12-98 (850) 433-5118

CR2E037 (10/97)