

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
James R. McMillan
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 815442

(9)

1. Corporation Name

T.L. JAMES & COMPANY, INC.

Principal Place of Business

106 WEST MISSISSIPPI AVE
RUSTON LA 71270-4422

Mailing Address

106 WEST MISSISSIPPI AVE
RUSTON LA 71270-4422

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/18/1961

3a. Date of Last Report

01/27/1994

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number

72-0221900

Applied For

Not Applicable

22. State, Apt. #, etc.

State, Apt. #, etc.

5. Certificate of Status Desired

KX

\$8.75 Additional
Fee Required

23. City & State

City & State

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

24

25

29

30

7. This corporation has liability for intangible tax under § 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

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 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

Signature of Registered Agent (Required if agent is not the corporation)

Signature of Registered Agent (Required if agent is not the corporation)

12. OFFICERS AND DIRECTORS

13. ADDITIONS-CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	CD
NAME	JAMES, G.W., JR.
STREET ADDRESS	106 W. MISSISSIPPI AVE
CITY, ST, ZIP	RUSTON LA
TITLE	SD
NAME	LOVE, JIMMY
STREET ADDRESS	106 W MISS AVE
CITY, ST, ZIP	RUSTON LA
TITLE	CV
NAME	BOSPFLUG, LANCE F
STREET ADDRESS	106 W. MISSISSIPPI AVE.
CITY, ST, ZIP	RUSTON LA
TITLE	TV
NAME	BRANTLEY, THOMAS E
STREET ADDRESS	106 W. MISSISSIPPI AVE.
CITY, ST, ZIP	RUSTON LA
TITLE	PD
NAME	DEASY, WILLIAM J
STREET ADDRESS	100 JAMES DR.
CITY, ST, ZIP	ST. ROSE LA
TITLE	VD
NAME	FOLK, T. J.
STREET ADDRESS	106 W MISS AVE
CITY, ST, ZIP	RUSTON LA

1. TITLE	☐ Change ☐ Addition
2. NAME	
3. STREET ADDRESS	
4. CITY, ST, ZIP	
5. TITLE	☐ Change ☐ Addition
6. NAME	
7. STREET ADDRESS	
8. CITY, ST, ZIP	
9. TITLE	☒ Change ☐ Addition
10. NAME	V/T
11. STREET ADDRESS	BOSPFLUG, LANCE F.
12. CITY, ST, ZIP	106 W. MISSISSIPPI AVE. RUSTON, LA 71270
13. TITLE	☐ Change ☒ Addition
14. NAME	V
15. STREET ADDRESS	SUMLER, JACK
16. CITY, ST, ZIP	106 W. MISSISSIPPI AVE. RUSTON, LA 71270
17. TITLE	☐ Change ☐ Addition
18. NAME	
19. STREET ADDRESS	
20. CITY, ST, ZIP	
21. TITLE	☐ Change ☐ Addition
22. NAME	
23. STREET ADDRESS	
24. 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)(b), Florida Statutes. I further certify that the information included 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 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Jimmy Love

Jimmy Love

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04-19-95

Date

(318)255-7912

Telephone Number