

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **825506** (9)

1. Corporation Name
ALLEN & O'HARA, INC.



Principal Place of Business: **3385 AIRWAYS BOULEVARD MEMPHIS TENNESSEE 38116**
Mailing Address: **3385 AIRWAYS BOULEVARD MEMPHIS TENNESSEE 38116**

2. Principal Place of Business (21-24) and 2a. Mailing Address (26-30) fields with sub-fields for Suite, Apt. #, City & State, Zip, and Country.

3. Date Incorporated or Qualified: **12/17/1970**
3a. Date of Last Report: **02/07/1995**
4. FET Number: **62-0800790**
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: \$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: **CT CORPORATION SYSTEM, 1200 S. PINE ISLAND ROAD, PLANTATION FL 33324**
10. Name and Address of New Registered Agent (81-85) fields for Name, Street Address, City, and 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: _____ DATE: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE: VD	JANSEN, PAT J	1. TITLE: Vice President/Treasurer	Jay D. Bolding
NAME: JANSEN, PAT J	1506 BROWNWOOD	12. NAME: Jay D. Bolding	3385 Airways Blvd
STREET ADDRESS: 1506 BROWNWOOD	MEMPHIS, TN 3	13. STREET ADDRESS: 3385 Airways Blvd	Memphis, TN 38116
CITY-ST-ZIP: MEMPHIS, TN 3		14. CITY-ST-ZIP: Memphis, TN 38116	
TITLE: VD	PORTER, CLYDE C.	2. TITLE:	
NAME: PORTER, CLYDE C.	6611 LARCH AVE	22. NAME:	
STREET ADDRESS: 6611 LARCH AVE	MEMPHIS, TN 3	23. STREET ADDRESS:	
CITY-ST-ZIP: MEMPHIS, TN 3		24. CITY-ST-ZIP:	
TITLE: S	HAYS, BARBARA	3. TITLE:	
NAME: HAYS, BARBARA	231 GARDENIA DR	32. NAME:	
STREET ADDRESS: 231 GARDENIA DR	MEMPHIS, TN 3	33. STREET ADDRESS:	
CITY-ST-ZIP: MEMPHIS, TN 3		34. CITY-ST-ZIP:	
TITLE: VD	BOWER, PAUL O	4. TITLE:	
NAME: BOWER, PAUL O	9200 ROCKY CANNON RD	42. NAME:	
STREET ADDRESS: 9200 ROCKY CANNON RD	CORDOVA TN	43. STREET ADDRESS:	
CITY-ST-ZIP: CORDOVA TN		44. CITY-ST-ZIP:	
TITLE: PCD	HAYS, HARRY S	5. TITLE:	
NAME: HAYS, HARRY S	231 GARDENIA DR	52. NAME:	
STREET ADDRESS: 231 GARDENIA DR	MEMPHIS, TN 3	53. STREET ADDRESS:	
CITY-ST-ZIP: MEMPHIS, TN 3		54. CITY-ST-ZIP:	
TITLE:		6. TITLE:	
NAME:		62. NAME:	
STREET ADDRESS:		63. STREET ADDRESS:	
CITY-ST-ZIP:		64. 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)(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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Jay D. Bolding* *V.P. Treasurer*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
DATE: **4/30/96** (901) 345-7620

CR2E034 (12/95)