

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

20% VOTING RIGHTS

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

15 JUN - 1 11 0:59

DOCUMENT # 833790 (9)

1. Corporation Name

JENKINS BRICK COMPANY

Principal Place of Business

201 6TH N.
MONTGOMERY AL 36104
US

Mailing Address

P. O. BOX 91
MONTGOMERY AL 36101
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/07/1975

3a. Date of Last Report

05/01/1994

4. FEI Number

63-0110960

Applied For

Not Applicable

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 (32),
Florida Statutes

☒

Yes

☐

No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

HARRIS, W. L.
3632 FRED GEORGE CT
TALLAHASSEE FL 32303

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 Sections 607.0505, Florida Statutes.

SIGNATURE

W. L. Harris

(NOTE: Registered Agent signature required after recording)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	VP
NAME	HARRIS, W.L.
STREET ADDRESS	3632 FRED GEORGE CT.
CITY, ST, ZIP	TALLAHASSEE FL
TITLE	VP
NAME	CORDIE, FRANK
STREET ADDRESS	8623 PEBBLE CREEK ROAD
CITY, ST, ZIP	MONTGOMERY AL
TITLE	CFO
NAME	WATTERS, WEBB M.
STREET ADDRESS	6424 DIANE COURT
CITY, ST, ZIP	MONTGOMERY AL
TITLE	CEO
NAME	JENKINS, J M
STREET ADDRESS	3607 EVEREST COURT
CITY, ST, ZIP	MONTGOMERY AL
TITLE	
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1.1 TITLE	☐ Change ☐ Addition
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5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY, ST, ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 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 (2)(b), 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:

Webb M. Watters
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Watters CFO 5/29/95

(534)

834-2210

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

CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # **835374** (0)
1. Corporation Name
ELECTRONICS, MISSILES & COMMUNICATIONS, INC

Principal Place of Business Mailing Address
**SUSQUEHANNA ST. EXT.
P.O. BOX 68
WHITE HAVEN PA 18661-0068**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **11/12/1975** 3a. Date of Last Report **05/11/1994**
4. FEI Number **13-1926296** Applied For
Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required
6. Election Campaign Financing
Trust Fund Contribution ☐ \$5.00 May Be
Added to Fees
7. This corporation has authority for international tax under a 1984 law.
Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business 2a. Mailing Address
21 **Susquehanna St. Ext.** 26
22 Suite Apt. #, etc. 27 Suite Apt. #, etc.
23 **White Haven, PA** 28 City & State
24 **18661** 25 29 30

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 (5)(b) and 607 15(8) 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 Sections 607 (5)(b) Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
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