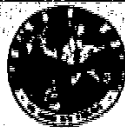


FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 FEB 28 PM 3:45

DOCUMENT # 841768 (5)

1. Corporation Name

CUSTOM MANAGEMENT CORPORATION

Principal Place of Business

4721 MORRISON DR
P O BOX 100206
MOBILE AL 36625

Mailing Address

4721 MORRISON DR
P O BOX 100206
MOBILE AL 36625

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

11/03/1978

3a. Date of Last Report

04/19/1994

4. FEI Number

23-1697269

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. 199.032,
Florida Statutes

☐ Yes

☒ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

2a. Mailing Address

25

Suite, Apt. #, etc.

26

City & State

27

Zip

Country

28

Zip

Country

29

Zip

Country

30

9. Name and Address of Current Registered Agent

PRENTICE-HALL CORPORATION SYSTEM, INC.
110 NORTH MAGNOLIA STREET
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP
S	HUNT, PHIL G.	4721 MORRISON DR	MOBILE AL
VT	MOTHERSHED, J. RUSSELL	4721 MORRISON DR	MOBILE AL
P	BYRUM, JOSEPH B.	4721 MORRISON DR	MOBILE AL
D	BISHOP, E. EUGENE	4721 MORRISON DR	MOBILE AL
D	OUTLAW, ARTHUR, R	4721 MORRISON DR	MOBILE AL
D	BEALL, SAMUEL, E. II	4721 MORRISON DR	MOBILE AL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	2. NAME	3. STREET ADDRESS	4. CITY - ST - ZIP
☐ Change ☐ Addition			
☐ Change ☐ Addition			
☒ Change ☐ Addition	President	Samuel E. Beall, III	4721 Morrison Drive
☐ Change ☐ Addition		Mobile, AL 36609	
☐ Change ☐ Addition			
☐ Change ☐ Addition			
☐ Change ☐ 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or in an attachment with an addendum.

SIGNATURE:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF MONITOR OFFICER OR DIRECTOR

2/21/95

(324) 344-3000