FILED FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 Jan 27 1998 8:00am FLORIDA DEPARTMENT OF STATE **CORPORATION** Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 846162 DOCUMENT # VAUGHN PAINT & DECORATING CENTER, INC. Principal Place of Business Mailing Address 315-1 HOLLYWOOD BLVD. 315-1 HOLLYWOOD BLVD. MARY ESTHER FL 32569-8946 MARY ESTHER FL 32569-8946 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/05/1980 4. FEI Number Applied For 2. Principal Place of Business 2a. Mailing Address 147 HO me WOOD 43-0980983 Not Applicable MOME WOOD \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing FORT WALTON Trust Fund Contribution Added to Fees FORT WALTON 8. This corporation owes or has paid the current year Intangible 30 OKALOOSA Yes OKAWOSA .5 Personal Property Tax due June 30. 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent A1 Name vaughn, aubrey e., Jr. 315-1 HOLLYWOOD BLVD. 82 Street Add MARY ESTHER FL 32569 83 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation sub-office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. nits this statement for the purpose of changing its registered corporation's board of directors. I hereby accept the appointment as registered SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NO1E Registered OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. Change Addition DELETE 1.1 TITLE TITLE VAUGHN, AUBREY E., JR. VAUGHN AUBREY E 147 HONEWOOD DR NAME 1.2 NAME 147 HOMEWOOD DR 1.3 STREET ADDRESS STREET ADDRESS BEACH, FI FT WALTON BEACH FL 1.4 CITY - ST - ZIP CITY-ST-ZIP DELETE 2.1 TITLE TITLE VAUGHN, NORMA T. 2.2 NAME NAME **147 HOMEWOOD DR** 2.3 STREET ADDRESS STREET ADDRESS FT WALTON BCH FL 2.4 CITY-ST-ZIP CITY-ST-ZIP Addition Change DELETE 3 1 TITLE TITLE VAUGHA, KATH LEEN L 19 RUBY CIRCLE MARY ESTHER, FI VAUGHN, KATHLEEN L 3.2 NAME NAME 19 RUBY CIR 3.3 STREET ADDRESS STREET ADDRESS MARY ESTHER FL 2569 3.4. CITY-ST-ZIP CITY-ST-ZIP Addition DELETE 4.1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - ZIP CITY-ST-ZIP Addition Change DELETE 5.1 TITLE TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 6.1 TITLE TITLE

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 of 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, of an address. Block 12 or Block 13 if changed, o

6.2 NAME

6.3 STREET ADDRESS

NAME

STREET ADDRESS CITY-ST-ZIP

1-17-98

850-862-8242