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FILED

May 14 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # 848760 (5)  
1. Corporation Name  
MITCHELL MINERAL COMPANY

Principal Place of Business

P O BOX 160306  
MOBILE AL 36616

Mailing Address

P O BOX 160306  
MOBILE AL 36616-1306



3. Date Incorporated or Qualified 04/07/1981	3a. Date of Last Report 04/10/1996
4. FEI Number 13-2749443	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

29 30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

DICKSON, MAX L.  
7200 N 9TH AVE  
STE 8  
PENSACOLA FL 32504

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when re-stating) \_\_\_\_\_ DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	NAME	1.1 TITLE	1.2 NAME
SAINT, JOHN B.	851 BELTLINE HWY S. MOBILE, AL 00000	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP
S	WESCH, PAUL C	2.1 TITLE	2.2 NAME
851 BELTLINE HWY S.	MOBILE, AL 00000	2.3 STREET ADDRESS	2.4 CITY-ST-ZIP
T	ISHEE, WILLIAM H	3.1 TITLE	3.2 NAME
851 BELTLINE HWY S.	MOBILE, AL 00000	3.3 STREET ADDRESS	3.4 CITY-ST-ZIP
D	KELLY DONALD P JR	4.1 TITLE	4.2 NAME
851 BELTLINE HWY S	MOBILE AL	4.3 STREET ADDRESS	4.4 CITY-ST-ZIP
D	STEFAN, CHESTER J	5.1 TITLE	5.2 NAME
851 BELTLINE HWY S	MOBILE AL	5.3 STREET ADDRESS	5.4 CITY-ST-ZIP
		6.1 TITLE	6.2 NAME
		6.3 STREET ADDRESS	6.4 CITY-ST-ZIP

14. I do 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone

4-30-97 (334)476-1200

CR2E034 (9/96)