

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Feb 12 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 852859 (8)

1. Corporation Name
W.W. DYAR & SONS, INC.

Principal Place of Business P.O. BOX 429, HIGHWAY 17 SOUTH HAMILTON AL 35570	Mailing Address P.O. BOX 429, HIGHWAY 17 SOUTH HAMILTON AL 35570
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 05/14/1982	
21 Suite, Apt #, etc.	22 City & State	23 Zip	24 Country	25	26
27 Suite, Apt #, etc.		28 City & State		29 Zip	
30 Country		31		32	
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9. Name and Address of Current Registered Agent HENRY, CECILE 105 PEARL AVENUE PANAMA CITY BEACH FL 32407		10. Name and Address of New Registered Agent	
81 Name		NO CHANGE	
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 _____ DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	NAME	1.1 TITLE	1.2 NAME
PD	DYAR, JOSEPH E.	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
RT. 2 BOX 448	HAMILTON AL	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP
VD	DYAR, JERRY W.	2.1 TITLE	2.2 NAME
RT 1 BOX 852	LYNN AL	2.3 STREET ADDRESS	2.4 CITY-ST-ZIP
STD	PEMBERTON, DONNA	3.1 TITLE	3.2 NAME
RT. 2, BOX 353	HAMILTON AL	3.3 STREET ADDRESS	3.4 CITY-ST-ZIP
		4.1 TITLE	4.2 NAME
		4.3 STREET ADDRESS	4.4 CITY-ST-ZIP
		5.1 TITLE	5.2 NAME
		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 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 prepare 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 address.

SIGNATURE: *Donna Pemberton* **Donna Pemberton** 2-06-98 (205)921-3565

CR2E034 (10/97)