

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 853069 (3)

1. Corporation Name

ALABAMA LANDMARK CORPORATION OF FLORIDA



Principal Place of Business

104 SOUTH MAIN STREET
ENTERPRISE AL 36330-2543

Mailing Address

104 SOUTH MAIN STREET
ENTERPRISE AL 36330-2543

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

9. Name and Address of Current Registered Agent

29

30

LEE, T. E.
17462 W. U.S. HIGHWAY 98
PANAMA CITY BEACH FL 32407

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 607.08(2) and 607.1506, 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 607.08(2), Florida Statutes.

SIGNATURE

Signature of the person authorized to execute this statement

Signature of the person authorized to execute this statement

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME PD
LEE, T. E.
STREET ADDRESS 104 S. MAIN STREET
CITY-STATE-ZIP ENTERPRISE AL

TITLE ☐ DELETE

NAME D
DOZIER, WILLIAM
STREET ADDRESS 104 SOUTH MAIN STREET
CITY-STATE-ZIP ENTERPRISE AL 00000

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-STATE-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ Change ☐ Addition

13.1 NAME

13.2 STREET ADDRESS

13.3 CITY-STATE-ZIP

☐ Change ☐ Addition

13.4 NAME

13.5 STREET ADDRESS

13.6 CITY-STATE-ZIP

☐ Change ☐ Addition

13.7 NAME

13.8 STREET ADDRESS

13.9 CITY-STATE-ZIP

☐ Change ☐ Addition

13.10 NAME

13.11 STREET ADDRESS

13.12 CITY-STATE-ZIP

☐ Change ☐ Addition

13.13 NAME

13.14 STREET ADDRESS

13.15 CITY-STATE-ZIP

☐ Change ☐ Addition

13.16 NAME

13.17 STREET ADDRESS

13.18 CITY-STATE-ZIP

☐ 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 19.07(3)(d), 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 changes, or on an attachment with an address.

SIGNATURE:

T. E. Lee
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/24/96

CR2E034 (12/95)