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PROFIT CORPORATION ANNUAL REPORT

1996

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

DOCUMENT # **855370** **(3)**

1. Corporation Name

WORSLEY COMPANIES' TAMPA, INC.

Principal Place of Business

POST OFFICE BOX 3227
WILMINGTON NC 28406
US

Mailing Address

POST OFFICE BOX 3227
WILMINGTON NC 28406
US

3. Date Incorporated or Qualified: 01/28/1983

3a. Date of Last Report: 03/08/1995

4. FEI Number: 56-1350986 [ ] 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 [X] Yes [ ] No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip 24 Country 25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip 29 Country 30

9. Name and Address of Current Registered Agent

CONLEY, KEVIN
11511 HIGHWAY 301 NORTH
TNONOTASASSA FL 33592

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 - Type or printed name of registered agent and title if applicable — Name of Registered Agent (signature required if filing) — DATE

12. OFFICERS AND DIRECTORS

TITLE	CD	[ ] DELETE
NAME	WORSLEY, W. C. JR.	
STREET ADDRESS	10 CARDINAL DRIVE	
CITY-ST-ZIP	WILMINGTON NC	
TITLE	VD	[ ] DELETE
NAME	AMBROSE, WILLIAM A	
STREET ADDRESS	10 CARDINAL DRIVE	
CITY-ST-ZIP	WILMINGTON NC	
TITLE	PD	[ ] DELETE
NAME	WORSLEY, W. CECIL III	
STREET ADDRESS	10 CARDINAL DRIVE	
CITY-ST-ZIP	WILMINGTON NC	
TITLE	S	[ ] DELETE
NAME	WOOTTON, JAMES N	
STREET ADDRESS	10 CARDINAL DR	
CITY-ST-ZIP	WILMINGTON NC	
TITLE	D	[ ] DELETE
NAME	WORSLEY,W.CECIL III	
STREET ADDRESS	10 CARDINAL DR	
CITY-ST-ZIP	WILMINGTON NC	
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	[ ] Change [ ] Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	[ ] Change [ ] Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	[ ] Change [ ] Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	[ ] Change [ ] Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	[ ] Change [ ] Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	[ ] Change [ ] Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

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 on an attachment with an address.

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date: 4-3-96 — Daytime Phone #: 910-395-5300

CR2E034 (12/95)