

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

FILED
Mar 22 1996 8:00 am
Secretary of State

DOCUMENT # F01112 (4)

1. Corporation Name

SEACOAST MANUFACTURING & VENDING, INC.

Principal Place of Business

3747 PEDDIE DRIVE
TALLAHASSEE FL 32303

Mailing Address

3747 PEDDIE DRIVE
TALLAHASSEE FL 32303

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

3. Date Incorporated or Qualified
10/10/1980

3a. Date of Last Report
02/22/1995

4. FEI Number

59-2051105

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

Yes No

9. Name and Address of Current Registered Agent

KORNEGAY, ROBERT W.
408 MERIDIAN RIDE
TALLAHASSEE FL 32303

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. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature of Person Authorized to Register Agent or Director

Signature of Person Authorized to Register Agent or Director

Date

12. OFFICERS AND DIRECTORS

TITLE PD
NAME KORNEGAY, ROBERT W.
STREET ADDRESS 408 MERIDIAN RIDE
CITY-STATE-ZIP TALLAHASSEE FL 32303

TITLE SD
NAME KORNEGAY, S. J.
STREET ADDRESS 408 MERIDIAN RIDE
CITY-STATE-ZIP TALLAHASSEE FL 32303

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

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CITY-STATE-ZIP

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NAME
STREET ADDRESS
CITY-STATE-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

14 TITLE Change Addition

15 NAME

16 STREET ADDRESS

17 CITY-STATE-ZIP

18 TITLE Change Addition

19 NAME

20 STREET ADDRESS

21 CITY-STATE-ZIP

22 TITLE Change Addition

23 NAME

24 STREET ADDRESS

25 CITY-STATE-ZIP

26 TITLE Change Addition

27 NAME

28 STREET ADDRESS

29 CITY-STATE-ZIP

30 TITLE Change Addition

31 NAME

32 STREET ADDRESS

33 CITY-STATE-ZIP

34 TITLE Change Addition

35 NAME

36 STREET ADDRESS

37 CITY-STATE-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 19.07(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

3-20-96

575-2093

Florida Phone

CR2E034 (12/95)