

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **F60135** (3)

1. Corporation Name

SID HIGGINBOTHAM, & ASSOCIATES, INC.



Principal Place of Business

% ROBINSON FRAZIER
8518 103RD STREET
JACKSONVILLE FL 32210

Mailing Address

% ROBINSON FRAZIER
8518 103RD STREET
JACKSONVILLE FL 32210

2. Principal Place of Business

2a. Mailing Address

21 State, Apt. #, etc.

26 State, 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

**FRAZIER, W. ROBINSON
1515 RIVERSIDE AVENUE, SUITE #A
JACKSONVILLE FL 32204**

3. Date Incorporated or Qualified
12/29/1981

3a. Date of Last Report
02/20/1995

4. FEI Number

59-2145152

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

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 607.0902 and 607.1509, 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 607.0905, Florida Statutes.

SIGNATURE

Sid Higginbotham

SID HIGGINBOTHAM - PRESIDENT

2/8/96

12. OFFICERS AND DIRECTORS

1. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

VP
**HIGGINBOTHAM, ROGER A
8518 103RD STREET
JACKSONVILLE, FL 00000
P
HIGGINBOTHAM, SIDNEY H
8518 103RD STREET
JACKSONVILLE, FL 00000**

☐ DELETE

☐ DELETE

☐ DELETE

☐ DELETE

☐ DELETE

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE
2. NAME
13. STREET ADDRESS
14. CITY, ST, ZIP
2. TITLE
22. NAME
23. STREET ADDRESS
24. CITY, ST, ZIP
3. TITLE
32. NAME
33. STREET ADDRESS
34. CITY, ST, ZIP
4. TITLE
42. NAME
43. STREET ADDRESS
44. CITY, ST, ZIP
5. TITLE
52. NAME
53. STREET ADDRESS
54. CITY, ST, ZIP
6. TITLE
62. NAME
63. STREET ADDRESS
64. CITY, ST, ZIP

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ 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 119.07(3)(k), Florida Statutes. I further certify that the information included 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:

Sid Higginbotham

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SID HIGGINBOTHAM - PRESIDENT 2/8/96

(Circ.)

Ex. 2 of Form 1000

CR2E034 (12/95)