

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 # F74749 (5)

1. Corporation Name

MORRISON CONSULTANTS, INC.



Principal Place of Business

10794 RICHMOND PLACE
COOPER CITY FL 33026
US

Mailing Address

10794 RICHMOND PL
COOPER CITY FL 33026
US

2. Principal Place of Business

2a. Mailing Address

21 2 Wellington Oaks Circle 26 2 Wellington Oaks Circle

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

27 City & State

23 Denton, TX

28 Denton, TX

24 Zip

Country

29 Zip

Country

25 76205

25 U.S.A.

30 76205

30 U.S.A.

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified
03/30/1982

3a. Date of Last Report
04/11/1995

4. FEI Number
59-2216291

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

MORRISON, GEORGE S.
10794 RICHMOND PL
COOPER CITY FL 33026

81 Name George T. Morrison

82 Street Address (P.O. Box Number is Not Acceptable)

1276 Zephyr Way South

84 City

Jacksonville Beach FL

85 Zip Code

32250

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

George T. Morrison

(NOTE: Registered Agent's Signature is required when not submitting)

3-19-96

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	DELETE
PD	MORRISON, GEORGE S.	10794 RICHMOND PL	COOPER CITY FL	<input type="checkbox"/>
STD	MORRISON, BETTY T	10794 RICHMOND PL	COOPER CITY FL	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	CHANGE	ADDITION
		2 Wellington Oaks Circle	Denton, TX 76205	<input checked="" type="checkbox"/>	<input type="checkbox"/>
		2 Wellington Oaks Circle	Denton, TX 76205	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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: *Betty T. Morrison*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-19-96

817-898-8964

CR2E034 (12/95)