

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # F92000000051 (4)

1. Corporation Name

FAIRFIELD ST. CROIX, INC.



Principal Place of Business

2800 CANTRELL ROAD
LITTLE ROCK AR 72202

Mailing Address

2800 CANTRELL ROAD
LITTLE ROCK AR 72202

3. Date Incorporated or Qualified
10/29/1992

3a. Date of Last Report
03/17/1995

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

4. FEI Number

59-2466062

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

10. Name and Address of New Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

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 of person for whom a new registered agent is being appointed

(NOTE: Registered Agent's signature is required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> DELETE
NAME	MCCONNELL, JOHN W	
STREET ADDRESS	2800 CANTRELL ROAD	
CITY - ST - ZIP	LITTLE ROCK AR 72202	
TITLE	VSD	<input type="checkbox"/> DELETE
NAME	DUMENY, MARCEL J	
STREET ADDRESS	2800 CANTRELL ROAD	
CITY - ST - ZIP	LITTLE ROCK AR 72202	
TITLE	VAS	<input type="checkbox"/> DELETE
NAME	GUNTER, JOE T	
STREET ADDRESS	2800 CANTRELL ROAD	
CITY - ST - ZIP	LITTLE ROCK AR	
TITLE	V	<input type="checkbox"/> DELETE
NAME	KLING, DANIEL	
STREET ADDRESS	2800 CANTRELL ROAD	
CITY - ST - ZIP	LITTLE ROCK AR 72202	
TITLE	VT	<input type="checkbox"/> DELETE
NAME	HOWETH, ROBERT W	
STREET ADDRESS	2800 CANTRELL ROAD	
CITY - ST - ZIP	LITTLE ROCK AR 72202	
TITLE	AS	<input type="checkbox"/> DELETE
NAME	BENNETT, WILLIAM J	
STREET ADDRESS	2800 CANTRELL ROAD	
CITY - ST - ZIP	LITTLE ROCK AR 72202	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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, as an attachment with an address.

SIGNATURE:

William J. Bennett

William J. Bennett

Date Daytime Phone #

(501) 664-6000

CR2E034 (12/95)