

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **F93000001165 (0)**

1. Corporation Name

GEORGIA/FLORIDA PREFERRED, INC.



Principal Place of Business

Mailing Address

**808 GORDON AVE.
THOMASVILLE GA 31792
US**

**P. O. BOX 1939
THOMASVILLE GA 31799
US**

3. Date Incorporated or Qualified
03/02/1993

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

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt #, etc.

26 Suite, Apt #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

4. FEI Number

58-1744334

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, type, and printed name of registered agent and the filer (applicable)

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

(DATE)

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **C** ☐ DELETE
NAME **MUELLER, GERALD B MD**
STREET ADDRESS **211 FAIRWAYS**
CITY-ST-ZIP **THOMASVILLE GA**

11 TITLE **C** ☒ Change ☐ Addition
12 NAME **SCOTT RICH**
13 STREET ADDRESS **US HWY 19**
14 CITY-ST-ZIP **THOMASVILLE, GA 31792**

TITLE **T** ☐ DELETE
NAME **SELLERS, J W JR.**
STREET ADDRESS **GORDON AVENUE AT MIMOSA DRIVE**
CITY-ST-ZIP **THOMASVILLE GA 31792**

21 TITLE ☐ Change ☐ Addition
22 NAME
23 STREET ADDRESS
24 CITY-ST-ZIP

TITLE **S** ☐ DELETE
NAME **BYRD, JEFF W MD**
STREET ADDRESS **322 E. WASHINGTON STREET**
CITY-ST-ZIP **THOMASVILLE GA 31792**

31 TITLE ☐ Change ☐ Addition
32 NAME
33 STREET ADDRESS
34 CITY-ST-ZIP

TITLE **EXD** ☐ DELETE
NAME **ST. ANGELO, MICHAEL**
STREET ADDRESS **104 TOWN CT.**
CITY-ST-ZIP **THOMASVILLE GA**

41 TITLE **EXD** ☒ Change ☐ Addition
42 NAME **GENE BELL**
43 STREET ADDRESS **407 PARK AVENUE**
44 CITY-ST-ZIP **THOMASVILLE, GA 31792**

TITLE **D** ☐ DELETE
NAME **STORY, JAMES L MD**
STREET ADDRESS **505 GORDON AVENUE**
CITY-ST-ZIP **THOMASVILLE GA 31792**

51 TITLE ☐ Change ☐ Addition
52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

61 TITLE ☐ Change ☐ Addition
62 NAME
63 STREET ADDRESS
64 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

G. A. Bell
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
F. A. Bell, Exec. Director

6/14/96 (912) 226-4122

Date Day-Month-Year

CR2E034 (3/96)