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CORPORATION ANNUAL REPORT 1995

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAY -1 PM 1:58

DOCUMENT # F94000006058 (1)

1. Corporation Name
SOUTHLAND DEVELOPMENT AND CONSTRUCTION, INC.

Principal Place of Business	Mailing Address
C/O H.I. HOLT, CPA P.O. BOX 226 LAUREL MS 39441	C/O H.I. HOLT, CPA P.O. BOX 226 LAUREL MS 39441

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address
21 Pensacola, FL	26 P. O. Box 11305
Suite, Apt. #, etc 22 P. O. Box 11305	Suite, Apt. #, etc 27 P. O. Box 11305
City & State 23 Pensacola, FL	City & State 28 Pensacola, FL
Zip 24 32504 / Country 25 USA	Zip 29 32504 / Country 30 USA

3. Date Incorporated or Qualified: 11/28/1994
3a. Date of Last Report:
4. FEI Number: 64-0275100 ☐ 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

SHOWS, WILLIAM H
4518 SEHOY CRICLE
PENSACOLA FL 32504

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

SIGNATURE ______ DATE ______

12. OFFICERS AND DIRECTORS

TITLE	PC
NAME	SHOWS, WILLIAM H
STREET ADDRESS	4518 SEHOY CIRCLE
CITY ST ZIP	PENSACOLA FL 32504
TITLE	SD
NAME	SHOWS, JACQUELINE
STREET ADDRESS	4518 SEHOY CIRCLE
CITY ST ZIP	PENSACOLA FL 32504
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	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE		☐ Change ☐ Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY ST ZIP		
2.1 TITLE		☐ Change ☐ Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY ST ZIP		
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY ST ZIP		
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY ST ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY ST ZIP		
6.1 TITLE		☐ Change ☐ 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)(i), 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: William H. Shows William H. Shows April 26, 1995
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date

0400287 FN