

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

FILED
Aug 12 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # F96000000803 (4) 1. Corporation Name GALLOWAY, JOHNSON, TOMPKINS & BURR A PROFESIONAL LAW CORPORATION			
Principal Place of Business 201 EAST GOVERNMENT STREET PENSACOLA FL 32501		Mailing Address 201 EAST GOVERNMENT STREET PENSACOLA FL 32501	
2. Principal Place of Business 21 55 BAYBRIDGE DRIVE Suite, Apt. #, etc. 22 City & State 23 GULF BREEZE FL Zip 24 32561 Country 25 SANTA ROSA		2a. Mailing Address 26 SAME Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country 30	
9. Name and Address of Current Registered Agent BURR, TIMOTHY F 201 EAST GOVERNMENT STREET PENSACOLA FL 32501		10. Name and Address of New Registered Agent 81 Name BURR, TIMOTHY T. 82 Street Address (P.O. Box Number is Not Acceptable) 55 BAYBRIDGE DRIVE 83 84 City GULF BREEZE FL 85 Zip Code 32561	
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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE _____			
12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P GALLOWAY, JOHN E 4817 JANICE STREET KENNER LA	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	D LARRY CANADA 6915 VICKSBURG ST NEW ORLEANS, LA 70124
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V JOHNSON, J M 61 CHATEAU MOUTON DRIVE KENNER LA	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	D ROGER ALLEN 304 BROADWAY NEW ORLEANS, LA 70110
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S TOMPKINS, JAMES M 2004 MILFORD HOUSTON TX	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	D RICK DUPLANTIER 856 CITY PARK AVE NEW ORLEANS LA 70119
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T BURR, TIMOTHY F 8 SLEEPY HOLLOW LANE SLIDELL LA	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	T TIMOTHY F. BURR 200 PINETREE DRIVE GULF BREEZE, FL 32561
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SMITH, THOMAS J 403 RIVER OAKS DR. COVINGTON LA	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SONNIER, GERARD J 1325 JEFF AVENUE NEW ORLEANS LA	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 02/15/1996	3a. Date of Last Report
4. FEI Number 72-1089568	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

14. I do hereby certify that the information supplied with this filing 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: _____

950 424 3412

CR2E034 (4/97)