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Apr 21 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 # F96000005475 (6)

1. Corporation Name  
PREMIER SALES OF PENSACOLA, INC.



Principal Place of Business: 8239 W. DARRYL DR. BATON ROUGE LA 70815-8065  
Mailing Address: 8239 W. DARRYL DR. BATON ROUGE LA 70815-8065

3. Date Incorporated or Qualified: 10/22/1996  
3a. Date of Last Report

2. Principal Place of Business: 21  
2a. Mailing Address: 26  
4. FEI Number: 72-0890337  
Applied For: Not Applicable

22. Suite, Apt. #, etc.: 27  
5. Certificate of Status Desired: \$8.75 Additional Fee Required

23. City & State: 28  
6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees

24. Zip: 25 Country: 29 Zip: 30 Country: 30  
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes [X] No [ ]

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

DEGUTIS, DEBORAH  
3018 N. DAVIS ST.  
PENSACOLA FL 32504

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: \_\_\_\_\_  
Signature of officer or president of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE: PDC  
NAME: THIBODEAUX, JOSEPH R  
STREET ADDRESS: 12441 MERLIN AVE.  
CITY-ST-ZIP: BATON ROUGE LA 70816  
[ ] DELETE  
TITLE: ST  
NAME: THIBODEAUX, SUSAN E  
STREET ADDRESS: 12441 MERLIN AVE.  
CITY-ST-ZIP: BATON ROUGE LA 70816  
[ ] DELETE  
TITLE: [ ] DELETE  
NAME: [ ] DELETE  
STREET ADDRESS: [ ] DELETE  
CITY-ST-ZIP: [ ] DELETE  
TITLE: [ ] DELETE  
NAME: [ ] DELETE  
STREET ADDRESS: [ ] DELETE  
CITY-ST-ZIP: [ ] DELETE

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 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: *Joseph R. Thibodeaux*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (9/96)