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

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED
95 APR 28 AM 11:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # G02791 (3)

1. Corporation Name
PRIMARY RESOURCES, INC.

| Principal Place of Business | Mailing Address |
|---|---|
| ~~200 WATERS EDGE TRL (32724)~~<br>~~P O BOX 2091~~<br>~~DELAND FL 32721~~<br>~~US~~ | ~~200 WATERS EDGE TRL (32724)~~<br>P O BOX 2091<br>DELAND FL 32721 |

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 10/01/1982
3a. Date of Last Report: 04/14/1994

2. Principal Place of Business
21 125 EAST INDIANA AVENUE
Suite, Apt. #, etc.
22 SUITE E
City & State
23 DELAND, FL 32724
Zip 24 32724 Country 25

2a. Mailing Address
26 SEE ABOVE
Suite, Apt. #, etc. 27
City & State 28
Zip 29 Country 30

4. FEI Number: 59-2251876 ☐ 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

BARKHEIMER, MARY JEANNE
200 WATERS EDGE TRAIL
DELAND FL 32724

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 _____
(Signature, typed or printed name 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 | PD | 11 TITLE | ☒ Change ☐ Addition |
| NAME | BARKHEIMER, MARY JEANNE | 12 NAME | |
| STREET ADDRESS | 200 WATERS EDGE TRAIL | 13 STREET ADDRESS | |
| CITY-ST-ZIP | DELAND FL | 14 CITY-ST-ZIP | 32724 |
| TITLE | VS | 21 TITLE | ☒ Change ☐ Addition |
| NAME | GAW, J KATHLEEN | 22 NAME | |
| STREET ADDRESS | 2834 CONCORD ROAD | 23 STREET ADDRESS | |
| CITY-ST-ZIP | DELAND FL | 24 CITY-ST-ZIP | 32720 |
| TITLE | | 31 TITLE | V/T ☐ Change ☒ Addition |
| NAME | | 32 NAME | HELEN HELGESTAD |
| STREET ADDRESS | | 33 STREET ADDRESS | 224 ARAB STREET |
| CITY-ST-ZIP | | 34 CITY-ST-ZIP | DEUTONA, FL 32725 |
| TITLE | | 41 TITLE | V ☐ Change ☒ Addition |
| NAME | | 42 NAME | SHERYL CHAMBERLAIN |
| STREET ADDRESS | | 43 STREET ADDRESS | 2165 CROOKED OAK TRAIL |
| CITY-ST-ZIP | | 44 CITY-ST-ZIP | DELAND, FL 32720 |
| TITLE | | 51 TITLE | ☐ Change ☐ Addition |
| NAME | | 52 NAME | |
| STREET ADDRESS | | 53 STREET ADDRESS | |
| CITY-ST-ZIP | | 54 CITY-ST-ZIP | |
| TITLE | | 61 TITLE | ☐ Change ☐ Addition |
| NAME | | 62 NAME | |
| STREET ADDRESS | | 63 STREET ADDRESS | |
| CITY-ST-ZIP | | 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Mary Jeanne Barkheimer 4/24/95 904 738-0405
SIGNATURE AND TYPED OR PRINTED NAME OF DIRECTOR OR OFFICER — Date — Daytime Phone #
MARY JEANNE BARKHEIMER

0414224 FP