

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # **G51650** (1)

1. Corporation Name

**ARMAY EQUITIES, INC.**

Principal Place of Business

**7200 N 9TH AVE  
SUITE 6  
PENSACOLA FL 32504**

Mailing Address

**7200 N 9TH AVE  
SUITE 6  
PENSACOLA FL 32504**

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

**DICKSON, MAX L.  
7200 N 9TH AVE  
SUITE 6  
PENSACOLA FL 32504**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

**FL**

85 Zip Code

3. Date Incorporated or Qualified

**07/28/1983**

3a. Date of Last Report

**06/01/1995**

4. FLE Number

**68-0853181**

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

10. Name and Address of New Registered Agent

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 re-registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE	<b>V</b>	<input type="checkbox"/> DELETE
NAME	<b>CAMPUS III, JOSEPH J</b>	
STREET ADDRESS	<b>7200 N 9TH AVE, STE 6</b>	
CITY-STATE-ZIP	<b>PENSACOLA FL</b>	
TITLE	<b>PD</b>	<input type="checkbox"/> DELETE
NAME	<b>SAINT, JOHN B.</b>	
STREET ADDRESS	<b>7200 N 9TH AVE, STE 6</b>	
CITY-STATE-ZIP	<b>PENSACOLA FL</b>	
TITLE	<b>SV</b>	<input type="checkbox"/> DELETE
NAME	<b>WESCH, PAUL C</b>	
STREET ADDRESS	<b>7200 N 9TH AVE, STE 6</b>	
CITY-STATE-ZIP	<b>PENSACOLA, FL 00000</b>	
TITLE	<b>VT</b>	<input type="checkbox"/> DELETE
NAME	<b>ISHEE, WILLIAM H</b>	
STREET ADDRESS	<b>7200 N 9TH AVE, STE 6</b>	
CITY-STATE-ZIP	<b>PENSACOLA, FL 00000</b>	
TITLE	<b>VD</b>	<input type="checkbox"/> DELETE
NAME	<b>KELLY DONALD P JR</b>	
STREET ADDRESS	<b>7200 N 9TH AVE, STE 6</b>	
CITY-STATE-ZIP	<b>PENSACOLA, FL 00000</b>	
TITLE	<b>VD</b>	<input type="checkbox"/> DELETE
NAME	<b>STEFAN, CHESTER J</b>	
STREET ADDRESS	<b>7200 N 9TH AVE, STE 6</b>	
CITY-STATE-ZIP	<b>PENSACOLA, FL 00000</b>	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2. NAME	
3. STREET ADDRESS	
4. CITY-STATE-ZIP	
5. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6. NAME	
7. STREET ADDRESS	
8. CITY-STATE-ZIP	
9. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
10. NAME	
11. STREET ADDRESS	
12. CITY-STATE-ZIP	
13. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
14. NAME	
15. STREET ADDRESS	
16. CITY-STATE-ZIP	
17. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
18. NAME	
19. STREET ADDRESS	
20. CITY-STATE-ZIP	

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**3-28-96 (334) 476-1200**

CR2E034 (12/95)

2 8 2

ARMAY EQUITIES, INC.  
F.E.I.# 63-0853181  
OFFICERS & DIRECTORS

<u>TITLE</u>	<u>NAME</u>	<u>COMPLETE BUSINESS ADDRESS</u>
Vice President	Herman L. Neese, Jr.	7200 N. 9th Ave., Suite 6, Pensacola, FL 32504
Asst. Secretary	William H. Ishee	7200 N. 9th Ave., Suite 6, Pensacola, FL 32504