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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1996

Purcept Place of Business Malling Anthrops P. O. 800 1130 ARCADIA Ft. 33821 See 1. 88EVARD P. O. 800 1130 ARCADIA Ft. 33821 See 1. 88EVARD P. O. 800 1130 ARCADIA Ft. 33821 See 1. 88EVARD P. O. 800 1130 ARCADIA Ft. 33821 See 1. 88EVARD P. O. 800 1130 ARCADIA Ft. 33821 See 1. 88EVARD P. O. 800 1130 ARCADIA Ft. 900 See 1. 88EVARD P. O. 800 1130 ARCADIA Ft. 900 See 1. 88EVARD P. O. 800 1130 ARCADIA Ft. 33821 ARCADIA Ft. 3382	 Corporation 	MENT # G580 Name 8 & SMITH AGENCY, INC.	49 (9)				
2. Maining Address 2. Maining Address 3. Maining Address 4. FEI Number 59-2330962 Applied From Sp2330962	P.O. BOX 1130 243 N BREVARD ARCADIA FL 33821 P. O. BOX 1130 ARCADIA FL 33821						
283 284	00					09/02/1983	01/30/1995
Compared	21			·		4. FEI Number 59-2330962	
City & State City & State 28	·	t, etc.	1	uite, Apt. #, etc.		5. Certificate of Status Desired	
20						S Floation Compaign Financies	Fee Hequired
Zo	23		⊢ ′				
10		Country Zip		Countr			
SMITH D. REX 243 N BREVARD P. D. BOX 1130 ARCADIA FL 33821 11. Pursuant the provisions of Sectors 607,0902 and 607,1508, Florida Statutes, the accomposition is administ this statement for the purpose of changing its registered difference registered agent, or both, in the State of Honda Statutes, the accomposition is administ this statement for the purpose of changing its registered difference registered agent, or both, in the State of Honda Statutes, the accomposition is board of directors. I hereby accept the exploriment as registered agent. I am second registered agent, and accept the extended to the corporation is board of directors. I hereby accept the appointment as registered agent. I am second registered regis	24			30			
SMITH D. REX		9. Name and Address of Currer	nt Registered Agent		I Name	10. Name and Address of New	Registered Agent
243 N BREVARD P. O. BOX 1130 ARCADIA FL 33821 84 Only FL 85 Zip Code	SMITH	D. REX			IName		
P. O. BOX 1130 ARCADIA FL 33821 84 City FL 85 Zip Code				82	Street .	Address (P.O. Box Number is Not Accepta	ble)
### ARCADIA FL 33821 ### Cry					3		
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Ronda Statutes, the above riseried corporation submits this stationer for the purpose of changing its registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent, I am registered agent, I am state of Florida Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent, I am state of Registered agent, I am s	ARCADIA FL 33821						
11. Persuant to the provisions of Sections 607.0502 and 607.1502, Floridal Statutes, tire above-insmed comporation submits this stationant for the purpose of changing his registered agent, and for floridal Such changing was withorized by the comporation's board of directors. Thereby accept the appointment as registered agent, 1 am flar and one of the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Description Provided in the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Provided in the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Provided in the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Provided in the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Provided in the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Provided in the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Provided in the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Provided in the obligations of, Section 607.0505, Florida Statutes. Signature Provided in the obligations of, Section 607.0505, Florida Statutes. Signature Provided in the obligations of, Section 607.0505, Florida Statutes. Signature Provided in the obligations of, Section 607.0505, Florida Statutes. Signature Provided in the obligations of, Section 607.0505, Florida Statutes. Signature Provided in the obligations of, Section 607.0505, Florida Statutes. Signature Provided in the obligations of, Section 607.0505, Florida Statutes. Signature Provided in the obligations of, Section 607.0505, Florida Statutes. Signature Provided in the obligations of, Section 607.0505, Florida Statutes. Signature Provided in the obligation of the obligation					84 Crty		
Title	familiar with	so agent, or both, in the State of Florin, and accept the obligations of, Sect	ua. Such change was authorization 607.0505, Florida Statutes	zed by the con s. OTE: Augistered Ag	poration's	board of directors. Thereby accept the application of directors and directors are applications of the application of the applic	DOINTMENT AS registered agent. I am
NAME DEES, GEORGE T. 1503 N ARCADIA AVE., P. O. BOX 1130 N/A ARCADIA AVE., P. O. BOX 1130 N/A ARCADIA FL 13 SIREFI ADDRESS 14 CTY-SI-ZIP			TOT 100 100 100 100 100 100 100 100 100 10			ADDITIONS/CHANGES TO OF	
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	STHEET ADDRESS			63 STHEE	: ADDRESS		
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)(x), Florida Statutes I further				64 CITY -	S1 - 718		

14. I do needy 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:

SMATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/27/96 Desire Proce s

CR2E034 (12/95)