FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE

APPROVED AND FILED

MAY 10 AM 10:35

SECRETARY OF STATE TALLAHASSEE, FLORIDA

DOCUMENT # G61466 (0)

1. Corporate Name

JEMCO OF PENSACOLA, INC.

Principal Place of Business	Mailing Address
6511 NORTH "W" STREET PENSACOLA FL 32505 US	6511 NORTH "W" ST. PENSACOLA FL 32505

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 09/28/1983	3a. Date of Last Report: 06/20/1994
4. FEI Number: 59-2343376	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. [X] Yes [ ] No	

2. Principal Place of Business (21 Suite, Apt. #, etc. 22; City & State 23; Zip 24; Country 25)

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

9. Name and Address of Current Registered Agent

MERCER, JOSEPH EDWARD
890 INDUSTRIAL CT
PENSACOLA FL 32505

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

12. OFFICERS AND DIRECTORS	
TITLE	PD
NAME	MERCER, JOSEPH EDWARD
STREET ADDRESS	8525 JADE ACRES RD
CITY-ST-ZIP	PENSACOLA FL
TITLE	VP
NAME	TURNER, HAROLD ALLEN
STREET ADDRESS	6541 COSTA MESA DRIVE
CITY-ST-ZIP	PENSACOLA FL
TITLE	S
NAME	SMITH, TINA MARIE
STREET ADDRESS	222 KENMORE ROAD
CITY-ST-ZIP	PENSACOLA FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 — [ ] Change [ ] Addition (blank)

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(1), 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: Tina Marie Smith 5-3-95 9049496660

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — DATE — DAYTIME PHONE

0307636 CP