# 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

DOCUMENT # G81213 (2)

1. Corporation Name
THE CONTRACT INTERIORS GROUP OF NORTHWEST FLORID A, INC.

FILED
95 FEB -7 PM 4:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE.

| Principal Place of Business | Mailing Address |
|---|---|
| 111 FERRY ROAD, S.E.<br>FORT WALTON BEACH FL 32548-2535 | 111 FERRY ROAD, S.E.<br>FORT WALTON BEACH FL 32548-2535 |

3. Date Incorporated or Qualified: 01/26/1984
3a. Date of Last Report: 02/11/1994

2. Principal Place of Business — 21:
2a. Mailing Address — 26:
Suite, Apt. #, etc. — 22:
Suite, Apt. #, etc. — 27:
City & State — 23:
City & State — 28:
Zip — 24: Country — 25:
Zip — 29: Country — 30:

4. FEI Number: 59-2346512 ☐ 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

KENDRICK, C. J.,III
111 FERRY ROAD S.E.
FORT WALTON BEACH FL 32548

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 | DP | 1.1 TITLE | ☐ Change ☐ Addition |
| NAME | KENDRICK, C.J., III | 1.2 NAME | |
| STREET ADDRESS | 61 YACHT CLUB DR.,APT #2 | 1.3 STREET ADDRESS | |
| CITY-ST-ZIP | FT. WALTON BEACH FL | 1.4 CITY-ST-ZIP | |
| TITLE | DS | 2.1 TITLE | DS ☒ Change ☐ Addition |
| NAME | DAVID, DON W., JR. | 2.2 NAME | DAVID, DON W., JR |
| STREET ADDRESS | 721 INDIAN TRAIL | 2.3 STREET ADDRESS | 3803 INDIAN TRAIL |
| CITY-ST-ZIP | DESTIN FL | 2.4 CITY-ST-ZIP | DESTIN, FL 32541 |
| TITLE | DT | 3.1 TITLE | ☐ Change ☐ Addition |
| NAME | ESPY, MARGARET S. | 3.2 NAME | |
| STREET ADDRESS | 225 MORIARITY AVE. | 3.3 STREET ADDRESS | |
| CITY-ST-ZIP | FT. WALTON FL | 3.4 CITY-ST-ZIP | |
| TITLE | DV | 4.1 TITLE | ☐ Change ☐ Addition |
| NAME | DOWLING, JAMES R. | 4.2 NAME | |
| STREET ADDRESS | 228 SANTA ROSA ST. SW | 4.3 STREET ADDRESS | |
| CITY-ST-ZIP | FT. WALTON BEACH FL | 4.4 CITY-ST-ZIP | |
| TITLE | P | 5.1 TITLE | P ☒ Change ☐ Addition |
| NAME | WRIGHT, J. DENISE | 5.2 NAME | WRIGHT, J. DENISE |
| STREET ADDRESS | 2701 U.S. 98 E. #8 | 5.3 STREET ADDRESS | 237 HIGHWAY AVE |
| CITY-ST-ZIP | DESTIN FL | 5.4 CITY-ST-ZIP | FT. WALTON BEACH, FL 32547 |
| TITLE | | 6.1 TITLE | ☐ Change ☐ Addition |
| NAME | | 6.2 NAME | |
| STREET ADDRESS | | 6.3 STREET ADDRESS | |
| CITY-ST-ZIP | | 6.4 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)(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:** J. Denise Wright — 2-5-1995
SIGNATURE AND TITLE OR PRINTED NAME OF CURRENT OFFICER OR DIRECTOR — Date — Daytime Phone #

0368422 CR