FĮLE	NOW: FILING FEE	AFTER MAY 1 IS	\$225.00	- ¬	
CORP	ROFIT PORATION AL REPORT 996	FLORIDA DEPARTA Sandra B. M Secretary of DIVISION OF CO	Mortham of State		
DOCUM	MENT # H086	65 (2)			
	BUSINESS SERVICES, IN	IC.			
OMITTI	posineos services, ii				
Principal Place of	of Business	Mailing Address		E HADIBIE BOIL OBIEL JEHO ALION OFFICE BILL	AIBIT BIBIT BIBIT BIBIT BIBIT BIBIT BIBIT
320 W. CERVANTES ST. PENSACOLA FL 32501 PENSACOLA FL 32501					
				07/01/1984	a. Date of Last Report 04/26/1995
2. Principal Plac	be of Business	2a. Mailing Address		4. FEI Number 59-2418194	Applied For Not Applicable
Suite, Apt. #	, etc.	26 Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22 City & State		City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for intar	ngible tax under s 199.032,
24	9. Name and Address of Curr	[29] [3	0	Florida Statutes Yes [
	9. Name and Address of Curr	ent Registered Agent	81 Name	to. Hamo and House of the Mary	
SMITH, ROBERT J. 82 Street Address (P.O. Box Number is Not Acceptable)					
	CERVANTES ST.				
PENSAC	OLA FL 32501		63		
			84 City		FL 85 Zip Code
11. Pursuant to	the provisions of Sections 607.05	02 and 607.1508, Florida Statutes,	he above named corpo	ration submits this statement for the purpos	se of changing its registered office
or rogistors	d agent, or both, in the State of Fl n, and accept the obligations of, Se	wida. Such channe was authorized t	by the corporation's boa	ard of directors. I hereby accept the appoint	ment as registered agent. Lam
SIGNATURE				College and other of	DATE
12.	Signature, typed or printed name of registered ag OFFICERS A	AND DIRECTORS	Rogistered Agent signature require 13.	ADDITIONS/CHANGES TO OFFICE	
TITLE	DPS	☐ DELETE	1. 1 TITLE		Change Addition
NAME	SMITH, ROBERT J.		12 NAME		
STREET ADDRESS	5605 VESTAVIA LANE		1.3 STREET ADDRESS		
CITY ST-ZIP	PENSACOLA FL DVT	DELETE	1.4 CITY-ST-ZIP 2 1 TITLE		Change Addition
TITLE NAME	SMITH, BARBARA D.		2.2 NAME		
STREET ADDRESS	5605 VESTAVIA LANE		2 3 STREET ADDRESS		
CITY+S1-ZIP	PENSACOLA FL		2.4 CITY - ST - ZIP		Channa
1ifLE	D	☐ DELETE	3. 1 TITLE		☐ Change ☐ Addition
NAME	SMITH, JAMES T.	NB	3.2 NAME		
STREET ADDRESS	7009 LONGLEAF CREEK (PENSACOLA FL	vn.	33 STREET ADDRESS 34 CITY-ST-ZIP		
CITY-ST-ZIP TITLE	FENONOUNTE	DELETE	4 1 TITLE		Change Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP		FI BOLESE	4.4 CITY - ST - ZIP		Change Addition
THILE		☐ DELETE	5 1 TITLE		
NAME			5.2 NAME 5.3 STREET ADDRESS		
STREET ADDRESS			5.4 City-St-Zip		
CITY-ST-ZIP TITLE		DELETE	6 1 TITLE		☐ Change ☐ Addition
l		-	6.2 NAME		

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)(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 cath; 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.

6 3 STREET ADDRESS

STREET ADDRESS

SIGNATURE: Robo at J. m. tt / Child

(904) 432 - 9111 Daylane Proce 1