

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 # H31977 (2)

1. Corporation Name

PEBLE OF FLORIDA II, INC.



Principal Place of Business

Mailing Address

% E. ALLAN RAMEY  
2212 B STREET  
MERIDIAN MS 39301

% E. ALLAN RAMEY  
2212 B STREET  
MERIDIAN MS 39301

3. Date Incorporated or Qualified

11/29/1984

3a. Date of Last Report

04/19/1995

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

4. FEI Number

64-0727361

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

10. Name and Address of New Registered Agent

RAMEY, E. ALLAN  
ONE CIRCLE DR.  
DEFUNIAK SPRINGS FL

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:

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent Signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE CPD ☐ DELETE

NAME BROADHEAD, PAUL SR.  
STREET ADDRESS 2212 B ST  
CITY-ST-ZIP MERIDIAN MS

1.1 TITLE ☐ Change ☐ Addition

TITLE D ☐ DELETE

NAME BROADHEAD, SHERRY M.  
STREET ADDRESS 1500 ROEBUCK DR  
CITY-ST-ZIP MERIDIAN MS

2.1 TITLE ☒ Change ☐ Addition

TITLE VSTD ☐ DELETE

NAME COVINTON, ANGELIA T.  
STREET ADDRESS 2212 B ST  
CITY-ST-ZIP MERIDIAN MS

3.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

2212 B Street  
Meridian, MS 39301

300001803713  
-05/01/96--01102--021

\*\*\*200.00

5-1-96

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 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:

ANGELIA T. COVINTON, Vice President

4/19/96 601-693-0602

Date

Daytime Phone #

CR2E034 (12/95)