

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

CORPORATION  
ANNUAL REPORT  
1995



FLORIDA DEPARTMENT OF STATE  
Suzanna B. Matheson  
Secretary of State  
DIVISION OF CORPORATIONS

**APPROVED AND FILED**  
MAY - 1 1995  
TALLAHASSEE, FLORIDA

DOCUMENT # **H47255 (5)**  
THE FOSHEE COMPANY, INC.

Principal Place of Business: **1832 PERRY PL. JACKSONVILLE FL 32207 US**  
Mailing Address: **P. O. BOX 5782 JACKSONVILLE FL 32247 US**

2. Principal Place of Business: **21** State: **FL** City: **JACKSONVILLE**  
2a. Mailing Address: **26** State: **FL** City: **JACKSONVILLE**  
22. State: **FL** City: **JACKSONVILLE**  
23. State: **FL** City: **JACKSONVILLE**  
24. State: **FL** City: **JACKSONVILLE**

3. Date incorporated or qualified: **03/14/1985** 3a. Date of last report: **05/17/1994**  
4. FEI Number: **59-2838663** Applied Fee:  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 filed by this filing the annual report required by Florida Statutes:  Yes  No

9. Name and Address of Current Registered Agent: **FOSHEE, DURWOOD O., JR. 4122 SPRING PARK RD. JACKSONVILLE FL 32207**  
10. Name and Address of New Registered Agent:  
B1. Name:  
B2. Street Address (P.O. Box Number is Not Applicable):  
B3.  
B4. City: **FL** B5. Zip: **32207**

11. Pursuant to the provisions of Sections 607.015 and 607.0205, Florida Statutes, this above-named corporation submits this statement for the purpose of changing its registered office or registered agent or both. The State of Florida said change was authorized by the corporation's board of directors, if any, except the appointment of registered agent. I am familiar with the provisions of Sections 607.015, Florida Statutes.  
SIGNATURE: *Durwood O. Foshee Jr.* 5-1-95

12. OFFICERS AND DIRECTORS		13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS IN 1995	
12a. NAME: <b>STD WOOD, ERNEST J.</b>	12b. STREET ADDRESS: <b>4122 SPRING PARK RD JACKSONVILLE FL</b>	13a. NAME: <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	13b. STREET ADDRESS: <b>1832 Perry Place JACKSONVILLE FL 32207</b>
12a. NAME: <b>PD FOSHEE, D.O., JR.</b>	12b. STREET ADDRESS: <b>4122 SPRING PARK RD JACKSONVILLE FL</b>	13a. NAME: <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	13b. STREET ADDRESS: <b>1832 Perry Place JACKSONVILLE FL 32207</b>
12a. NAME:	12b. STREET ADDRESS:	13a. NAME: <input type="checkbox"/> Change <input type="checkbox"/> Addition	13b. STREET ADDRESS:
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12a. NAME:	12b. STREET ADDRESS:	13a. NAME: <input type="checkbox"/> Change <input type="checkbox"/> Addition	13b. STREET ADDRESS:
12a. NAME:	12b. STREET ADDRESS:	13a. NAME: <input type="checkbox"/> Change <input type="checkbox"/> Addition	13b. STREET ADDRESS:

14. I, the undersigned, certify that the information supplied with this filing is true, correct, complete and does not qualify for the exemption stated in Section 607.015, Florida Statutes. I further certify that the information included 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. The reason for trustee responsibility to complete this report is required by Chapter 607, Florida Statutes, and that my trustee responsibility is not being waived by any other filing or action.  
SIGNATURE: *Durwood O. Foshee Jr.* 5-1-95 904-388-6667  
PRINTED NAME AND TYPED OR PRINTED NAME OF FILING OFFICER OR DIRECTOR: **Durwood O. Foshee Jr.**