

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morthan  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # H54137 (5)

1. Corporation Name  
TAROC, INC.



Principal Place of Business

FIRST UNION NATIONAL BANK OF FLORIDA  
LEGAL DIVISION, 225 WATER ST.  
JACKSONVILLE FL 32231-0010

Mailing Address

FIRST UNION NATIONAL BANK OF FLORIDA  
LEGAL DIVISION, 225 WATER ST.  
JACKSONVILLE FL 32231-0010

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

30 Country

3. Date Incorporated or Qualified

04/23/1985

3a. Date of Last Report

05/01/1995

4. FEI Number

59-2592206

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

THE PRENTICE-HALL CORPORATION SYSTEM INC.  
1201 HAYS STREET  
SUITE 105  
TALLAHASSEE FL 32301

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

10. Name and Address of New Registered Agent

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, if not identical to agent's name

Signature typed or printed name of registered agent, if not identical to agent's name

DATE

12. OFFICERS AND DIRECTORS

TITLE S  
NAME MILLER, JERRY M JR  
STREET ADDRESS 301 S COLLEGE ST  
CITY-ST-ZIP CHARLOTTE NC

DELETE

TITLE D  
NAME HODNETT, BYRON E.  
STREET ADDRESS 225 WATER STREET  
CITY-ST-ZIP JACKSONVILLE FL

DELETE

TITLE D  
NAME WERTZ, LARRY J.  
STREET ADDRESS 225 WATER STREET  
CITY-ST-ZIP JACKSONVILLE FL

DELETE

TITLE D  
NAME MITCHELL, JOHN A.  
STREET ADDRESS 225 WATER STREET  
CITY-ST-ZIP JACKSONVILLE FL

DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE D  
12 NAME THOMPSON, G. KENNEDY  
13 STREET ADDRESS 225 WATER STREET  
14 CITY-ST-ZIP JACKSONVILLE, FL 32202

Change Addition

21 TITLE  
22 NAME  
23 STREET ADDRESS  
24 CITY-ST-ZIP

Change Addition

31 TITLE  
32 NAME  
33 STREET ADDRESS  
34 CITY-ST-ZIP

Change Addition

41 TITLE  
42 NAME  
43 STREET ADDRESS  
44 CITY-ST-ZIP

Change Addition

51 TITLE  
52 NAME  
53 STREET ADDRESS  
54 CITY-ST-ZIP

Change Addition

61 TITLE  
62 NAME  
63 STREET ADDRESS  
64 CITY-ST-ZIP

Change Addition

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:

*Larry J. Wertz*

Larry J. Wertz

4/29/96

(904) 361-3651

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (12/95)