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 # **H78799** **(4)**

1. Corporation Name

REESE JIMMY JIM EVERITT, INC.

Principal Place of Business

2518 HIGHWAY 77 STE B
LYNN HAVEN FL 32444

Mailing Address

2518 HIGHWAY 77 STE B
LYNN HAVEN FL 32444

2. Principal Place of Business
21 Street Address
22 City & State
23 Zip 24 County 25

2a. Mailing Address
26 Street Address
27 City & State
28 Zip 29 County 30

3. Date Incorporated or Qualified: **10/01/1985**

3a. Date of Last Report: **04/26/1995**

4. FEI Number: **59-2599266** 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

EVERITT, REESE JIMMY
629 BAYWOOD DR.
LYNN HAVEN FL 32404

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 Section [illegible] Florida Statutes, the undersigned corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. The principal place of business of the corporation is the same as the new registered office, if any, and the new registered office, if any, is identical to the new business address of the registered agent. I am familiar with and accept the obligations of a registered agent under Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

TITLE	DPT	☐ Delete
NAME	EVERITT, REESE JIMMY	
STREET ADDRESS	2518 HWY 77, SUITE B	
CITY-ST-ZIP	LYNN HAVEN FL	
TITLE	VS	☐ Delete
NAME	EVERITT, SARAH KAYE	
STREET ADDRESS	2518 HWY 77, SUITE B	
CITY-ST-ZIP	LYNN HAVEN FL	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN '12

11 TITLE	☐ Change ☐ Addition
12 NAME	
13 STREET ADDRESS	
14 CITY-ST-ZIP	
21 TITLE	☐ Change ☐ Addition
22 NAME	
23 STREET ADDRESS	
24 CITY-ST-ZIP	
31 TITLE	☐ Change ☐ Addition
32 NAME	
33 STREET ADDRESS	
34 CITY-ST-ZIP	
41 TITLE	☐ Change ☐ Addition
42 NAME	
43 STREET ADDRESS	
44 CITY-ST-ZIP	
51 TITLE	☐ Change ☐ Addition
52 NAME	
53 STREET ADDRESS	
54 CITY-ST-ZIP	
61 TITLE	☐ Change ☐ Addition
62 NAME	
63 STREET ADDRESS	
64 CITY-ST-ZIP	

CR2E034 (12/95)

14. I do hereby certify that the [illegible] Florida Statutes. I further certify that the information [illegible] 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 in compliance with the above requirement. Signature

SIGNATURE: REESE JIMMY EVERITT

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

March 28, 1996 (904) 265-0777