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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

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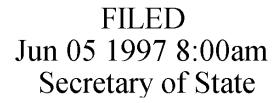
PARTAN	INDUSTRIES,	INC.

Mailing Address

159 AVENUE °C* APALACHICOLA FL 32320

Principal Place of Business

159 AVENUE "C" APALACHICOLA FL 32320-1833





				3. Date Incorporated or Qualified	3a. Date of Last Report
				09/30/1985	06/28/1996
2. Principal Place of Business	2a. Mailing Address			4. FEI Number	Applied For
21]	26			59-2889932	Not Applicable
Sulte, Apt. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional
22	27			C. Germanou er oldiet Beeliet	Fee Required
City & State	City & State			6. Election Campaign Financing	\$5.00 May Be
23	28	-		Trust Fund Contribution	Added to Fees
Zip Country	Zip	Country	′	8. This corporation has liability for in	ntangible tax under s. 199.032,
24 25	29	30			Yes No
Name and Address of Curren	t Registered Agent		· · · · · · · · · · · · · · · · · · ·	10. Name and Address of New Reg	Istered Agent
HOWZE, BOYD W., JR.		81	Name		
68 17TH STREET APALACHICOLA FL 32320-1933		R2	82 Street Address (P.O. Box Number is Not Acceptable)		
			Sirect Address (P.O. Box Number is Not Acceptable)		,
4		83			
	•	ļ			
		84	City		FL 85 Zip Code
11 Purculant to the provisions of Sections 607.050	2 and 607 1508. Florida Statut	les the above	e-named corr	poration submits this statement for the or	I I
11. Pursuant to the provisions of Sections 607.050 office or registered agent, or both, in the State agent. I am familiar with, and accopt the obligations of the obligations of the obligations.	of Florida. Such change was	authorized by	the corpora	tion's board of directors. I hereby accep	t the appointment as registered
agent. I am lamiliar with, and accopt the obliga	ations of, Section 607.0505, Fi	orida Statutes	S.		·
SIGNATURE					
Signature, typed or printed name of registered age 12. OFFICERS AN		13.	ent signature radul	red when reinstating) ADDITIONS/CHANGES TO OFFIC	DATE EDS AND DIRECTORS IN 12
TITLE P	DELETE	11 11/14		ADDITIONS/CHANGES TO OFFIC	Change Addition
•	L Dilitie				Unlarige Macritoli
HOWZE, BOYD W., JR.		1.2 NAME			ļ
STREET ADDRESS 66 17TH STREET		1.3 STREET	1		
CITY-ST-ZIP APALACHICOLA FL	P. P. P. T.	1.4 CITY - S	17-ZIP		
TITLE ST	☐ DELETE	2.1 TITUE			☐ Change ☐ Addition
NAME HILL, WALLACE		2.2 NAME			
STREET ADDRESS 159 AVENUE "C"		2.3 STREET	ADDRESS		·
CITY-ST-ZIP APALACHICOLA FL		2. 4 CITY -	ST-ZIP		
TITLE	☐ DELETE	3.1 TITLE			Change Addition
NAME		3 2 NAME			
STREET ADDRESS		3.3 STREET	ADDRESS		
CITY-ST-ZIP		3.4. CITY - :	ST-71P	· · · · · · · · · · · · · · · · · · ·	
TITLE	DELETE	4.1 TITLE			Change Addition
NAME		4. 2 NAME	})
STREET ADDRESS		4.3 STREET	ADDRESS		1
City-ST-ZIP		4.4 C(TY - 5	ST-ZIP		\
TITLE	DELETE	5.1 TITLE			Change Addition
NAME		5.2 NAME]		
STREET ADDRESS		5.3 STREET	ADDRESS)
CITY-ST-ZIP		5.4 CITY - S			
TITLE	DELETE	6.1 TITLE			Change Addition
NAME		6.2 NAME			
STREET ADDRESS		6.3 STREET	Annoese		ļ
					İ
CITY-ST-ZIP		6.4 CITY - S	I-ZIP I	d in Section 119.07(3)(i), Florida Statutes	

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 eath; that a man 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.

GNATURE:

GNATURE:

GNATURE:

SIGNATURE: