

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

CORPORATION  
ANNUAL REPORT  
1995



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mathias  
Secretary of State  
BUREAU OF CORPORATIONS

APPROVED  
AND  
FILED

95 MAY -1 PM 10: 01

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # **J44925** (2)

1. Corporation Name  
**SOUTHSIDE 76, INC.**

DO NOT WRITE IN THIS SPACE

Principal Executive Officer: **% WALLY E. BROTHERTON**  
575 - 45TH AVE S  
ST. PETERSBURG FL 33705

Principal Address: **% WALLY E. BROTHERTON**  
575 - 45TH AVE S  
ST. PETERSBURG FL 33705

3. Date Incorporated or Qualified <b>11/21/1986</b>	3a. Date of Last Report <b>04/22/1994</b>
4. FEI Number <b>59-2833163</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
8. This corporation has liability for intangible tax under § 199.032, Florida Statutes. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address
21. State: <b>FL</b>	26. State: <b>FL</b>
22. City & State	27. City & State
23. City & State	28. City & State
24. City & State	29. City & State
25. City & State	30. City & State

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
<b>BROTHERTON, WALLY E.</b> <b>575 - 45TH AVE S</b> <b>ST. PETERSBURG FL 33705</b>		01. Name	
		02. Street Address (P.O. Box Number is Not Acceptable)	
		03. City	
		04. City	<b>FL</b> 05. Zip Code

11. Pursuant to the provisions of Sections 190.031 and 190.032, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office of principal 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 Sections 190.031, Florida Statutes.

SIGNATURE: \_\_\_\_\_ Title: \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS	
NAME <b>PST BROTHERTON, WALLY E.</b>	STREET ADDRESS <b>875 S VILLAGE DR #103</b>	NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
CITY <b>ST. PETERSBURG FL</b>		STREET ADDRESS	
NAME <b>D ADAMSON, CHRIS</b>	STREET ADDRESS <b>BUSINESS ROUTE 44</b>	NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
CITY <b>WAYNESVILLE MO</b>		STREET ADDRESS	
NAME		NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		STREET ADDRESS	
CITY		NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		STREET ADDRESS	
STREET ADDRESS		NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
CITY		STREET ADDRESS	
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STREET ADDRESS		STREET ADDRESS	
CITY		NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		STREET ADDRESS	
STREET ADDRESS		NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
CITY		STREET ADDRESS	

14. I declare under penalty of perjury that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Sections 190.031 and 190.032, Florida Statutes. I further certify that the information included in this annual report or supplementary 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 the report as required by Chapter 190, Florida Statutes, and that my name appears in Block 12 of Block 13 of this report, or in an attachment with an address.

SIGNATURE: *Wally E. Brotherton* 4/28/95 813 8962107