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PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name

J50748

(9)

| RUSSELL MAY PAINTING, INC. | | | 1 188/1/8 8381 8111 8211 | | |
|---|---|----------------------------------|--|---|------------------------------------|
| Principal Place of Business | Mailing Address | -/ | | 1801 6160 1011 01814 01011 0181 3 | HOM DIGH HILII HODI |
| % DEE D. REITER % DEE D. REITER 725 BLACKSTONE BLDG. 725 BLACKSTONE JACKSONVILLE FL 32202 JACKSONVILLE FL | | BLDG. | | | <u> </u> |
| | | | 3. Date Incorporated or Ou 12/31/1986 | alified 3a. Date of Last F 04/03/ | |
| 2. Principal Place of Business | 2a. Mailing Address | | 4. FEI Number | | Applied For |
| Suite, Apt. #, etc. | Suite, Apt. #, etc. | | 59-2748351 | | Not Applicable |
| 22 | 27 | | 5. Certificate of Status Desi | led I I | 5 Additional Required |
| City & State | City & State | | 6. Election Campaign Finan | | 00 May Be |
| 23 Compton | 28 | · | Trust Fund Contribution | Adde | ed to Fees |
| Zip Country 25 | Ζιρ 29 | Country 30 | 8. This corporation has liable Florida Statutes | ility for intancele tax under s Yes X No | s 199.032, |
| 9. Name and Address of Curren | | 1901 | 10. Name and Address of | | |
| , | | 81 Na | me | <u> </u> | |
| REITER, DEE D. | | 82 Str | reet Address (P.O. Box Number is Not Ac | coeptable) | |
| 725 BLACKSTONE BLDG. | | 83 | | | |
| JACKSONVILLE FL 32202 | | | | | |
| | | 84 City | у | FL 85 Z | ip Code |
| Pursuant to the provisions of Sections 607.0502 or registered agent, or both, in the State of Florid familiar with, and accept the obligations of, Section SIGNATURE Signature, typed or printed name of registered agent. | a. Such change was author on 607.0505, Florida Statute | ized by the corporal-c es. | d corporation submits this statement for on's board of directors. I hereby accept the transport with instituted. | the purpose of changing its be appointment as registered | registered office d agent. I am |
| 12. OFFICERS AND | • ··· | 13. | | O OFFICERS AND DIRECTO | ORS IN 12 |
| TITLE PST | ☐ DELETÉ | 1 1 10 LE | | ☐ Change | Addition |
| NAME MAY, RUSSELL | | 1.2 NAME | | | |
| STREET ADDRESS 31 SAN PABLO CIRCLE SO JACKSONVILLE FL | • | 1.3 STREET ADDRE | ISS | | |
| TILE SAURSONVILLE FL | ☐ DELETE | 1.4 CITY - ST - ZIP 2 1 TITLE | | Change | Addition |
| NAME | | 2.2 NAME | | Onlings | |
| STREET ADDRESS | | 2.3 STREET ADDRE | ess | | |
| CITY-ST-ZIP | | 2 4 CiTy - \$1 - ZiP | | | |
| TITLE | ☐ DELEJE | 3 1 TillE | | ☐ Cnange | Add tion |
| STREET ADDRESS | | 3.2 NAME 3.3 STREET ADDR | Ene | | |
| CHY-SI-ZIP | | 3.4 CITY - ST - 7IP | 533 | | |
| THE | DELETE | 4 TITLE | | ☐ Change | Addition |
| NAME | | 4.2 NAME | | | |
| STREET ADDRESS | | 4.3 STREET ADDRE | iss | | |
| City-St-ZiP | [7] DELETE | 4.4 C•TY - ST - ZiP | | | |
| TITLE | | 5 1 T-TLF 5 2 NAME | | ☐ Change | Addition |
| STREET ADDRESS | | 5 3 STREET ADORE | ss | | |
| CITY - ST - ZIP | | 5.4 CITY-ST-ZIP | | | |
| TITLE | ☐ DELETE | 6 1 TITLE | | Change | Addition |
| NAME | | 6.2 NAME | | | |
| STREET ADDRESS | | 6.3 STREET ADDRE | SS | | |
| City-St-ZiP 14. I do hereby certify that the information supplied w | | 64 CHY-SI-ZIP | | | |

certify that the information indicated on this annual report of supplemental annual report is true and accurate and that my signature shall have the same legal effect as it made under oath; that I am an officer or director of the comporation 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.

3-19-96 4042471791