FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT
1995

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

APPROVED AND FILED
95 MAY -1 PM 9:24
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # J68292 (8)

1. Corporation Name
BALL, HUMPHREY & WORLEY, INC.

Principal Place of Business	Mailing Address
9500 S. DADELAND BLVD. #200 MIAMI FL 33156 US	P.O. BOX 561567 MIAMI FL 33256-1567 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified	3a. Date of Last Report
04/15/1987	05/31/1994

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc 22	Suite, Apt. #, etc 27
City & State 23	City & State 28
Zip / Country 24 / 25	Zip / Country 29 / 30

4. FEI Number: 65-0034681 ☐ 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	10. Name and Address of New Registered Agent
WORLEY, J. HAYES, JR 9500 S DADELAND BLVD STE 200 MIAMI FL 33156	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 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 _____ DATE
Signature, typed or printed name of registered agent and the # applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	11 TITLE	☒ Change ☐ Addition
NAME	WORLEY, JACK HAYES	12 NAME	
STREET ADDRESS	464 S DIXIE HWY	13 STREET ADDRESS	Delete - Retired
CITY-ST-ZIP	CORAL GABLES FL	14 CITY-ST-ZIP	
TITLE	D	21 TITLE	D/V ☒ Change ☐ Addition
NAME	WORLEY, J. HAYES JR	22 NAME	
STREET ADDRESS	464 S DIXIE HWY	23 STREET ADDRESS	9500 SO. DADELAND BLVD, #200
CITY-ST-ZIP	CORAL GABLES FL	24 CITY-ST-ZIP	MIAMI, FLA. 33156
TITLE	D	31 TITLE	D/V ☒ Change ☐ Addition
NAME	HUMPHREY, HAROLD M.	32 NAME	
STREET ADDRESS	464 S DIXIE HWY	33 STREET ADDRESS	9500 SO. DADELAND BLVD, #200
CITY-ST-ZIP	CORAL GABLES FL	34 CITY-ST-ZIP	MIAMI, FLA. 33156
TITLE	D	41 TITLE	D/P/S/T ☒ Change ☐ Addition
NAME	BALL, CHARLES C.	42 NAME	
STREET ADDRESS	464 S DIXIE HWY	43 STREET ADDRESS	9500 SO. DADELAND BLVD, #200
CITY-ST-ZIP	CORAL GABLES FL	44 CITY-ST-ZIP	MIAMI, FLA 33156
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 CITY-ST-ZIP	

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)(i), 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: Charles C. Ball - Pres 3/1/95 (305) 670-6111
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Telephone Number
CHARLES C. BALL

0431810 FP