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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT # K10008

1. Corporation Name

(6)

SPYGLASS INVESTMENT COMPANY

OI TOLF	AGO II WEGI INEIN				
Principal Place of Business		Mailing Address		t dinight him than man men mann	1811 dilli didit digit dilli delli delli dilli
% E. C. HIGDON 121 W. CLARK ST. QUINCY FL 32351 US		% E. C. HIGDON P. O. BOX 996 OUINCY FL 32353-0996 US			
				3. Date Incorporated or Qualified 01/01/1988	3a. Date of Last Report 05/18/1995
2. Principal Plac	ce of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26 EC. Higho	<u> </u>	59-2942955	Not Applicable \$8.75 Additional
Suite, Apt. #	r, etc.	Suite, Apt. #, etc. 27 P. O. Blx 9	77	5. Certificate of Status Desired	Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28 Quincy	-	Trust Fund Contribution	Added to Fees
Ζiρ	Country	<sup>Zip</sup> 29 32353 - 0977 3	Country U.S	This corporation has liability for in Florida Statutes	
24	25 g. Name and Address of Curr		U V 3	10. Name and Address of New Re	
	g. Name and Address of Con-	ent negistered Agent	81 Name		
HICDON	I E O		82 Street Addr	ress (P.O. Box Number is Not Acceptable	e)
HIGDON, E. C. 121 W. CLARK ST.			Street Addr	ess (i.e. Elex Harrison to Herritage	,
	FL 32351		83		ļ
			84 City		85 Zip Code
] '				and the state of t	FL BS Expension its registered office
			the above-named corpor by the corporation's boa	ration submits this statement for the purp rd of directors. I hereby accept the appo	bintment as registered agent. I am
famil ar with	h, and accept the obligations of S	ection 607.0505, Florida Statutes		الدالا	la.
SIGNATURE _	El High	dura shell Concerns.	day soven April Saprature resolve	d where two statings	DAIL
12.	Signature Typed or printed notine of registered a OFFICERS A	AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFI	
TITLE	PST	☐ DELETE	1 1 THEF		Change Addition
NAME	HIGDON, E. C.		1.2 NAME		
STREET ADDRESS	121 W. CLARK ST.		1.3 STREET ADDRESS		
CITY-ST-ZIP	QUINCY FL		1.4 CITY - S1 - ZIP		Change Addition
TITLE		☐ DELETE	2 1 TIFLE		C. S.
NAME			2.2 NAME 2.3 STREET ADDRESS		
STREET ADURESS			2.4 CHY-ST-ZIP		
CITY - ST - ZIP		T DELETE	3 1 TITEF .		Change Addition
NAME			3 2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZP			3.4 CITY - ST - Z/P		Change Addition
TITLE		☐ DELETE	4 1 TITLE		Change Addition
NAME			4.2 NAMÉ		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP		C DELETE	4.4.CITY - S1 - ZIF: 51.T:TLF		Change Addition
TITLE			5.2 NAME		
NAME STREET ADDRESS			5.3 STHEE* ADDRESS		
CITY - ST - ZIP			5 4 CHY-ST-ZIP		
TITLE		☐ DELETE	€ 1 VILE Years	0000017 -04/11/96010	7551 bylge Addition
NAME			6.2 NAME	-U4/11/96UIU ***200.00	`#OO1N
STREET ADDRESS			6 3 STREET ADDRESS	<b>☆☆☆∠∪∪゚∪∪</b>	
1	1		BAIDITY \$1,7(P		

14. Ltd. 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)(k). Florida Statutes. I furthe 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 each certify 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 attrichment with an address.

SIGNATURE:

SIGNATURE AND TYPED ON HINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/9/96

904-617-7071 Gaytime Phone # CR2E034 (12/95)