FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

DOCUMENT # K11633 (0)

1. Corporation Name
AL-MAR COAL CO.

Principal Place of Business	Mailing Address
9254 WESTLINK TERRACE SEMINOLE FL 34647	9254 WESTLINK TERRACE SEMINOLE FL 34647

3. 01/11/1988 3a. 01/21/1994

2. Principal Place of Business	2a. Mailing Address
21 1935 S. Conway Rd	26 1935 S. Conway Rd
22 Apt P-4	27 Apt P-4
23 Orlando	28 Orlando
24 32812	29 32812
25 Orange	30 Orange

4. FEI Number: 59-2864942 ☐ Applied For ☐ Not Applicable

5. ☐ $6.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

7. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

HARMAN, RUFUS A.
9254 WESTLINK TERRACE
SEMINOLE FL 34647

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable) 1935 S. Conway Rd.
83 Apt P-4
84 City Orlando FL 85 Zip Code 32812

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 Margaret P Harman 17 Jan 1995
(Signature, Title(s) or Capacity of registered agent and title if applicable) (NOTE: Registered Agent signature required and must be legible) Date

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PTD	11 TITLE	☒ Change ☐ Addition
NAME	HARMAN, RUFUS A.	12 NAME	
STREET ADDRESS	9254 WESTLINK TERRACE	13 STREET ADDRESS	1935 S. Conway Rd Apt P4
CITY-ST-ZIP	SEMINOLE FL	14 CITY-ST-ZIP	Orlando FL 32812
TITLE	VSD	21 TITLE	☒ Change ☐ Addition
NAME	HARMAN, MARGARET P.	22 NAME	
STREET ADDRESS	9254 WESTLINK TERRACE	23 STREET ADDRESS	1935 S. Conway Rd Apt P-4
CITY-ST-ZIP	SEMINOLE FL	24 CITY-ST-ZIP	Orlando, FL 32812
TITLE		31 TITLE	☐ Change ☐ Addition
NAME		32 NAME	
STREET ADDRESS		33 STREET ADDRESS	
CITY-ST-ZIP		34 CITY-ST-ZIP	
TITLE		41 TITLE	☐ Change ☐ Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY-ST-ZIP		44 CITY-ST-ZIP	
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/We hereby certify that the information contained herein is true, complete, and correct. I am a director or officer 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 above, or on an attachment with an address.

SIGNATURE: MARGARET P. HARMAN 17 Jan 95
SIGNATURE AND TYPED OR PRINTED NAME OF DIRECTOR OR OFFICER

0103500 CP