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FILED

Feb 14 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # K54302

(0)

1. Corporation Name

MEX OF SANTA ROSA, INC.



Principal Place of Business

1613 BERRYHILL RD.  
MILTON FL 32570

Mailing Address

1613 BERRYHILL RD.  
MILTON FL 32570-7717

3. Date Incorporated or Qualified

12/15/1988

3a. Date of Last Report

02/07/1996

2. Principal Place of Business

21 5837 KIRKLAND DR

2a. Mailing Address

26 5837 KIRKLAND DR

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

23 MI, FL

24 32570

25 SANTA ROSA

27 City & State

28 MILTON, FL

29 32570

30 SANTA ROSA

4. FEI Number

59-2915321

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

\$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

ANDREWS, ROY V.  
124 WILLING ST.  
MILTON FL 32570

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE

NAME YOUNG, BRUCE  
STREET ADDRESS 1613 BERRYHILL ROAD  
CITY-ST-ZIP MILTON FL

TITLE D ☐ DELETE

NAME MAYEAUX, DENNIS  
STREET ADDRESS 1613 BERRYHILL ROAD  
CITY-ST-ZIP MILTON FL

TITLE D ☐ DELETE

NAME MCLEOD, PAUL  
STREET ADDRESS 1613 BERRYHILL ROAD  
CITY-ST-ZIP MILTON FL

TITLE D ☐ DELETE

NAME CARPENTER, S. DAVE  
STREET ADDRESS 181 KIRKLAND DRIVE  
CITY-ST-ZIP MILTON FL

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☒ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information included 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:

S. DAVE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10 FEB 97 904-626-7884

Date

Daytime Phone #

CR2E034 (9/96)