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FILED
Mar 24 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 # K55664

(2)

1. Corporation Name
BIGGS & SON, INC.



Principal Place of Business
PO BOX 14388
JACKSONVILLE FL 32238

Mailing Address
PO BOX 14388
JACKSONVILLE FL 32238-1388

2. Principal Place of Business

2a. Mailing Address

21 State, Apt. #, etc.

26 State, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24 25

29 30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

01/04/1989

3a. Date of Last Report

03/18/1996

4. FEI Number

59-2920494

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

10. Name and Address of New Registered Agent

81 Name

Biggs, Franklin D.

82 Street Address (P.O. Box Number is Not Acceptable)

6131 Old Middleburg Road

83

84 City

Jacksonville

FL

85 Zip Code

32222

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 *Franklin D. Biggs*

(NOTE - Registered Agent signature required when reappointing)

2-19-97

DATE

12. OFFICERS AND DIRECTORS

TITLE	PDT	☐ DELETE
NAME	BIGGS, FRANKLIN D.	
STREET ADDRESS	4288 EVERETT AVE	
CITY-ST-ZIP	MIDDLEBURG FL	
TITLE	SD	☐ DELETE
NAME	OLYER, JAMES M.	
STREET ADDRESS	4288 EVERETT AVE	
CITY-ST-ZIP	MIDDLEBURG FL	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
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	PDT	☒ Change ☐ Addition
1.2 NAME	Biggs, Franklin D.	
1.3 STREET ADDRESS	6131 Old Middleburg Road	
1.4 CITY-ST-ZIP	Jacksonville, FL 32222	
2.1 TITLE	SD	☒ Change ☐ Addition
2.2 NAME	Olyer, James M.	
2.3 STREET ADDRESS	6131 Old Middleburg Road	
2.4 CITY-ST-ZIP	Jacksonville, FL 32222	
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 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: *Franklin D. Biggs*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-19-97 (904) 777-5497
Date Daytime Phone

CR2E034 (9/96)