

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

FILED
Apr 29 1996 8:00 am
Secretary of State

DOCUMENT # **K79378** (1)
1. Corporation Name
PCWRC, INC.



Principal Place of Business
**ATTN: RON SAMUELIAN
707 W. 19TH ST.
PANAMA CITY FL 32405**

Mailing Address
**ATTN: RON SAMUELIAN
707 W. 19TH ST.
PANAMA CITY FL 32405**

2. Principal Place of Business
21 **767 Airport Road**
Suite, Apt. #, etc.
22
City **Panama City** State **FL**
23 Zip **32405** County **Bay**
24
2a. Mailing Address
26 **767 Airport Road**
Suite, Apt. #, etc.
27
City **Panama City** State **FL**
28 Zip **32405** County **Bay**
29

3. Date Incorporated or Qualified **04/11/1989**
3a. Date of Last Report **04/28/1995**
4. FEI Number **59-2950739**
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

9. Name and Address of Current Registered Agent

**SAMUELIAN, RON
707 W. 19TH ST.
PANAMA CITY FL 32405**

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 _____

11.1 Name
11.2 Street Address (P.O. Box Number is Not Acceptable)
11.3
11.4 City **FL** 11.5 Zip Code

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	DELETE
D	STRINGER, DOUGLAS L.	2011 HARRISON AVE.	PANAMA CITY FL	<input type="checkbox"/>
D	GRACE, JOSEPH P.	401 W. 19TH ST.	PANAMA CITY FL	<input type="checkbox"/>
D	MANER, THOMPSON C.	801 E. 6TH ST.	PANAMA CITY FL	<input type="checkbox"/>
D	ROHAN, MICHAEL X.	408 W. 19TH ST.	PANAMA CITY FL	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

13.1 TITLE	13.2 NAME	13.3 STREET ADDRESS	13.4 CITY - ST - ZIP	13.5
				<input type="checkbox"/> Change <input type="checkbox"/> Addition
				<input type="checkbox"/> Change <input type="checkbox"/> Addition
				<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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)(b), 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 in an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Seculian 4/24/96 747-0400

CR2E034 (12/95)