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**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

CORPORATION ANNUAL REPORT 1995		THE FLORIDA AMMENDMENT STATE SECRETARY OF STATE DIVISION OF CORPORATIONS
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DOCUMENT # L01910 (3)

1. Corporation Name
PANHANDLE SAND AND CLAY, INC.

Principal Place of Business % JAMES R. TIPPINS 7151 FRONT BEACH RD 217 PANAMA CITY BEACH FL 32407	Mailing Address % JAMES R. TIPPINS 7151 FRONT BEACH RD 217 PANAMA CITY BEACH FL 32407
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DO NOT WRITE IN THIS SPACE.

2. Principal Place of Business	2a. Mailing Address
21 State, Apt. #, etc.	26 State, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
24 Country	29 Country
25	30

3. Date Incorporated or Qualified 07/13/1989	3a. Date of Last Report 04/18/1994
4. FBI Number 59-2957493	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	

9. Name and Address of Current Registered Agent

**TIPPINS, JAMES R.
7151 FRONT BCH RD 217
PANAMA CITY BEACH FL 32407**

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
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 _____ DATE _____
(Signature must be printed and dated. Registered Agent signature required when resigning)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	NAME	11 TITLE	☐ Change ☐ Addition
NAME	STREET ADDRESS	12 NAME	
CITY, ST, ZIP	CITY, ST, ZIP	13 STREET ADDRESS	
TITLE	NAME	14 CITY, ST, ZIP	
NAME	STREET ADDRESS	21 TITLE	☐ Change ☐ Addition
CITY, ST, ZIP	CITY, ST, ZIP	22 NAME	
TITLE	NAME	23 STREET ADDRESS	
NAME	STREET ADDRESS	24 CITY, ST, ZIP	
CITY, ST, ZIP	CITY, ST, ZIP	31 TITLE	☐ Change ☐ Addition
TITLE	NAME	32 NAME	
NAME	STREET ADDRESS	33 STREET ADDRESS	
CITY, ST, ZIP	CITY, ST, ZIP	34 CITY, ST, ZIP	
TITLE	NAME	41 TITLE	☐ Change ☐ Addition
NAME	STREET ADDRESS	42 NAME	
CITY, ST, ZIP	CITY, ST, ZIP	43 STREET ADDRESS	
TITLE	NAME	44 CITY, ST, ZIP	
NAME	STREET ADDRESS	51 TITLE	☐ Change ☐ Addition
CITY, ST, ZIP	CITY, ST, ZIP	52 NAME	
TITLE	NAME	53 STREET ADDRESS	
NAME	STREET ADDRESS	54 CITY, ST, ZIP	
CITY, ST, ZIP	CITY, ST, ZIP	61 TITLE	☐ Change ☐ Addition
TITLE	NAME	62 NAME	
NAME	STREET ADDRESS	63 STREET ADDRESS	
CITY, ST, ZIP	CITY, ST, ZIP	64 CITY, ST, ZIP	

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 110.07(9)(k), 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. If 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 of changed, or on an attachment with an addendum.

SIGNATURE: *Kay H. Tippins* **Kay H. Tippins Sec. Treas** **02-22-95** **904-233-2860**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #