

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.  
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # L06288 (9)

1. Corporation Name

BAY SPRINKLER SPECIALISTS, INC.

Principal Place of Business

Mailing Address

% JUDITH P. VOISELLE  
7703 LAIRD STREET  
PANAMA CITY FL 32408

% JUDITH P. VOISELLE  
7703 LAIRD STREET  
PANAMA CITY FL 32408



2. Principal Place of Business

2a. Mailing Address

21 7136 Hwy. 77

26 P.O. Box 899

Suite, Apt. #, etc

Suite, Apt. #, etc

22 City & State

27 City & State

23 Southport, FL

28 Lynn Haven, FL

Zip

Country

Zip

Country

24 32409

25 USA

29 32444

30 USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

VOISELLE, JUDITH P.  
7703 LAIRD STREET  
PANAMA CITY FL 32408

81 Name Edward Carter

82 Street Address (P.O. Box Number is Not Acceptable)  
7136 Hwy 77

83

84 City Southport

FL

85 Zip Code 32409

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

Edward T. Carter

Edward T. Carter

7/31/96

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

(NOTE: Registered Agent signature required when re-registering)

(DATE)

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P  
NAME VOISELLE, JUDITH P.  
STREET ADDRESS 7151 W. HWY 98 SUITE 283  
CITY - ST - ZIP PANAMA CITY

TITLE ST  
NAME POND, ELEANOR G  
STREET ADDRESS 7703 LAIRD ST  
CITY - ST - ZIP PANAMA CITY

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

1.1 TITLE P  
1.2 NAME Edward T. Carter  
1.3 STREET ADDRESS 7136 Hwy 77  
1.4 CITY - ST - ZIP Southport, FL 32409

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY - ST - ZIP

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY - ST - ZIP

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY - ST - ZIP

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY - ST - ZIP

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 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 119.07(3)(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, that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Edward T. Carter

Edward T. Carter

7/31/96

(904) 265-6654

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

OFFICER'S PHONE #

CR2E034 (3/96)