

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # L14216

1. Corporation Name

PARKWAY PRINTING ENTERPRISES, INC.

Principal Place of Business

Mailing Address

148 N. TYNDALL PKWY  
PANAMA CITY, FLORIDA 32404

2. Principal Place of Business

2a. Mailing Address

21 148 N. TYNDALL PKWY

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

3a. Date of Last Report

October 28, 1991

4. FEI Number

59-2961842

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

JUDITH M. TINDER

82

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

148 N. TYNDALL PKWY

83

84

City

LYNN HAVEN

FL

85

Zip Code

32404

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 *Judith M. Tinder, president*

5-20-96

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when not stating)

DATE

12. OFFICERS AND DIRECTORS

TITLE NAME ☐ DELETE

STREET ADDRESS

CITY-ST-ZIP

TITLE NAME ☐ DELETE

STREET ADDRESS

CITY-ST-ZIP

TITLE NAME ☐ DELETE

STREET ADDRESS

CITY-ST-ZIP

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TITLE NAME ☐ DELETE

STREET ADDRESS

CITY-ST-ZIP

TITLE NAME ☐ DELETE

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☒ Addition

1.2 NAME JUDITH M. TINDER

1.3 STREET ADDRESS 504 VIRGINIA AVE

1.4 CITY-ST-ZIP LYNN HAVEN, FLORIDA 32444

2.1 TITLE ☒ Change ☒ Addition

2.2 NAME KATHLEEN L. TINDER

2.3 STREET ADDRESS 3117 E. ORLANDO RD.

2.4 CITY-ST-ZIP PANAMA CITY, FLORIDA 32405

3.1 TITLE T/S ☒ Change ☐ Addition

3.2 NAME JUDITH M. TINDER

3.3 STREET ADDRESS 504 VIRGINIA AVE

3.4 CITY-ST-ZIP LYNN HAVEN, FL 32444

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 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE

*Judith M. Tinder* JUDITH M. TINDER

5-20-96

(904) 785-2761

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (12/95)