

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED

Mar 06 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 # L36914

(4)

1. Corporation Name

ST. JOE TERMINAL COMPANY

Principal Place of Business

1650 PRUDENTIAL DR S400
JACKSONVILLE FL 32207
US

Mailing Address

PO BOX 1380
JACKSONVILLE FL 32201-1380
US



3. Date Incorporated or Qualified
12/14/1989

3a. Date of Last Report
04/23/1996

4. FEI Number

59-2982510

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

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

ANDERSON, R.A.
1650 PRUDENTIAL DR.
SUITE 400
JACKSONVILLE FL 32207

81 Name

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

83

84 City

FL

85 Zip Code

10. Name and Address of New Registered Agent

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME
DP
BELIN, J.C.
1601 GARRISON AVENUE
PORT ST. JOE FL

TITLE ☒ DELETE

NAME
D
FORD, E. T.
100 ST. JOSEPH DRIVE
PORT ST. JOE FL

TITLE ☐ DELETE

NAME
DV
THORNTON, W L
1650 PRUDENTIAL DR 400
JACKSONVILLE FL

TITLE ☐ DELETE

NAME
DV
NEDLEY, R.E.
2004 MONUMNET AVE.
PORT ST. JOE FL

TITLE ☐ DELETE

NAME
S
ANDERSON, R A
1650 PRUDENTIAL DR
JACKSONVILLE FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE ☐ Change ☐ Addition

12 NAME

13 STREET ADDRESS

14 CITY-ST-ZIP

21 TITLE ☒ Change ☐ Addition

NAME
DV
R. W. Parrish
Railroad Building
Port St. Joe, Florida

31 TITLE ☐ Change ☐ Addition

32 NAME

33 STREET ADDRESS

34 CITY-ST-ZIP

41 TITLE ☐ Change ☐ Addition

42 NAME

43 STREET ADDRESS

44 CITY-ST-ZIP

51 TITLE ☐ Change ☐ Addition

52 NAME

53 STREET ADDRESS

54 CITY-ST-ZIP

61 TITLE ☐ Change ☒ Addition

62 NAME

63 STREET ADDRESS

64 CITY-ST-ZIP

T
Petty, C. M.
1650 Prudential Drive #400
Jacksonville, FL 32207

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 its 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. (Attach an attachment with an address.)

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/25/97

(904) 396-6600

Date Daytime Phone

CR2E034 (9/96)