

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

APPROVED AND FILED

2004-11-11 9:31

STATE OF FLORIDA

1995



FLORIDA DEPARTMENT OF STATE
 DIVISION OF CORPORATIONS
 1901 EAST BAY DRIVE
 TALLAHASSEE, FLORIDA 32309-0001
 (904) 493-0001

DOCUMENT # L46422 (6)

ED & BEVERLY COLLINS, INC.

2. Name and Address of Applicant
 C/O BEVERLY COLLINS
 231 NORTH BAY DR
 LYNN HAVEN FL 32444

2a. Mailing Address
 C/O BEVERLY COLLINS
 231 NORTH BAY DR
 LYNN HAVEN FL 32444

3. Date of Filing of this Report 01/25/1990
3a. Date of Last Report 07/26/1994

4. Filing Fee 59-3069859
 Applied For: Not Applicable

5. Check date of Status Change \$8.75 Additional Fee Required

6. Election Campaign Financials \$5.00 May Be Added to Fees
 Trust Funds Contributions

7. Are you a corporation organized in Florida? Yes No
Florida Statute: Yes No

21. Name and Address of Applicant

22. Name and Address of Applicant

23. Name and Address of Applicant

24. Name and Address of Applicant

25. Name and Address of Applicant

26. Mailing Address

27. State of Applicant

28. City & State

29. City & State

30. City & State

9. Name and Address of Current Registered Agent
 COLLINS, BEVERLY
 231 NORTH BAY DRIVE
 LYNN HAVEN FL 32444

10. Name and Address of New Registered Agent

01. Name

02. Street Address, P.O. Box Number, & Not Applicable

03.

04. City

05. Zip Code FL

11. I, the undersigned, being duly sworn, depose and say that I am the officer or director of the corporation named herein, and that I am authorized by the board of directors of the corporation to execute this report and to file the same with the Department of State, Florida Statutes, Chapter 607, Part 1, Florida Statutes.

12. ADDITIONAL REGISTERED AGENTS

D
 COLLINS, BEVERLY
 231 NORTH BAY DR.,
 LYNN HAVEN FL

13. ADDITIONAL REGISTERED AGENTS

1. NAME

1. STREET ADDRESS

1. CITY

1. NAME

1. STREET ADDRESS

1. CITY

1. NAME

1. STREET ADDRESS

1. CITY

1. NAME

1. STREET ADDRESS

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1. CITY

1. NAME

1. STREET ADDRESS

1. CITY

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in section 607.011, 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 person or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears on Block 1 of the back of this report or on an affidavit with an address.

SIGNATURE: Beverly Collins
 Beverly Collins
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-1-95 (904) 265-0019