FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

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95 MAY -1 AM 8:17

SECRETARY OF STATE TALLAHASSEE, FLORIDA

CORPORATION ANNUAL REPORT

1995

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

DOCUMENT # **L79576** **(9)**

1. Corporation Name

CORIM FLORIDA, INC.

Principal Place of Business

100 LAURA STREET
SUITE 600
JACKSONVILLE FL 32202

Mailing Address

100 LAURA STREET
SUITE 600
JACKSONVILLE FL 32202

DO NOT WRITE IN THIS SPACE

3. Date Incorporated / Qualified: **06/12/1990**

3a. Date of Last Report: **02/15/1994**

4. FEI Number: **11-3018585** ☐ 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

7. Is this corporation a subsidiary of another corporation? ☐ Yes ☒ No

2. Principal Place of Business — 21 / Suite/Apt. # — 22 / City & State — 23 / Zip — 24 / County — 25

2a. Mailing Address — 26 / Suite/Apt. # — 27 / City & State — 28 / Zip — 29 / County — 30

9. Name and Address of Current Registered Agent

WILLINGHAM, BEN H. JR
100 LAURA STREET
SUITE 600
JACKSONVILLE FL 32202

10. Name and Address of New Registered Agent

81 Name

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

83

84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Section 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

12. OFFICERS AND DIRECTORS

Title	PD
Name	WILLINGHAM, BEN H.
Street Address	100 LAURA ST.,SUITE 600
City-St-Zip	JACKSONVILLE FL
Title	VD
Name	MCAFEE, T. J.
Street Address	100 LAURA ST.,SUITE 600
City-St-Zip	JACKSONVILLE FL
Title	VS
Name	COCHRAN, BETH W
Street Address	LAURA ST SUITE
City-St-Zip	JACKSONVILLE FL
Title	
Name	
Street Address	
City-St-Zip	
Title	
Name	
Street Address	
City-St-Zip	
Title	
Name	
Street Address	
City-St-Zip	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS

1 Title	☒ Change	☐ Addition
2 Name	VS	
3 Street Address	Nichols, Maurice	
4 City-St-Zip	100 Laura St, Suite 600	
	Jacksonville, FL 32202	
1 Title	☐ Change	☐ Addition
2 Name		
3 Street Address		
4 City-St-Zip		
1 Title	☐ Change	☐ Addition
2 Name		
3 Street Address		
4 City-St-Zip		
1 Title	☐ Change	☐ Addition
2 Name		
3 Street Address		
4 City-St-Zip		
1 Title	☐ Change	☐ Addition
2 Name		
3 Street Address		
4 City-St-Zip		

14. I hereby certify that the information supplied with this filing is accurate. For profit corporations only: I further certify that the information indicated on this report or supplemental 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 with an asterisk, or I am attaching a list with an asterisk.

SIGNATURE: Ben H. Willingham, Jr. 4/28/95 (904) 355-3500

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Ben H. Willingham, Jr.

0018477 CP