

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

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 FEB 15 PM 3:06

DOCUMENT # M76665 (2)

1. Corporation Name
RELISH THE THOUGHT, INC.

Principal Place of Business
1020 MAGNOLIA DR.
QUINCY FL 32351

Mailing Address
1020 MAGNOLIA DR.
QUINCY FL 32351

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified
04/13/1988

3a. Date of Last Report
03/02/1994

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

27

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

4. FEI Number
NOT APPLICABLE

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

FLETCHER, A. CLARK
2602 WEST 11TH STREET
PANAMA CITY FL 32401

81 Name

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

83

84 City

FL

85 Zip Code

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 date if applicable

(NOTE: Registered Agent signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE	P
NAME	CLARK, CHRISTOPHER M.
STREET ADDRESS	1203 EAST HANNA AVENUE
CITY - ST - ZIP	TAMPA FL
TITLE	V
NAME	CLARK, JOHN E.
STREET ADDRESS	1020 MAGNOLIA DRIVE
CITY - ST - ZIP	QUINCY FL
TITLE	ST
NAME	CLARK, IRENE
STREET ADDRESS	1020 MAGNOLIA DRIVE
CITY - ST - ZIP	QUINCY FL
TITLE	D
NAME	CLARK, JOHN
STREET ADDRESS	105 MONTROSS AVENUE
CITY - ST - ZIP	RUTHERFORD NJ
TITLE	D
NAME	CLARK, THOMAS J.
STREET ADDRESS	105 MONTROSS AVENUE
CITY - ST - ZIP	RUTHERFORD NJ
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	P	☐ Change ☐ Addition
1.2 NAME	Clark, Christopher M.	
1.3 STREET ADDRESS	3074 Overlook Drive	
1.4 CITY - ST - ZIP	Clearwater, FL 34620	
2.1 TITLE		☐ Change ☐ Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY - ST - ZIP		
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY - ST - ZIP		
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 110.07(3)(b), 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:

John E. Clark V.P. John E. Clark 2/12/95 875-7200

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Signature Number # 4