

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # M80362 (0)

1. Corporation Name

FORREST & COMPANY, INCORPORATED



Principal Place of Business

Mailing Address

% ALLEN W. FORREST  
1415 ATLANTIC BLVD. STE D  
NEPTUNE BEACH FL 32266

% ALLEN W. FORREST  
1415 ATLANTIC BLVD. STE D  
NEPTUNE BEACH FL 32266

3. Date Incorporated or Qualified  
05/11/1988

3a. Date of Last Report  
03/23/1995

2. Principal Place of Business

2a. Mailing Address

21 1500 ROBERTS DR.

26 1500 ROBERTS DRIVE

4. FEI Number

59-2940029

Applied For

Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

27 City & State

23 JACKSONVILLE BEACH

28 JACKSONVILLE BEACH

24 Zip

Country

29 Zip

Country

32250

USA

32250 3222

USA

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

\$5.00 May Be  
Added to Fees

Trust Fund Contribution

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

FORREST, ALLEN W.  
1415 ATLANTIC BEACH  
STE D  
NEPTUNE BEACH FL 32266

81 Name

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

83 1500 ROBERTS DRIVE

84

JACKSONVILLE BEACH

FL

85 Zip Code

32250 3222

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 607.0506, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent or director (Applicable)

(NOTE: Registered Agent Signature required on this filing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY - ST - ZIP  
DPT  
FORREST, ALLEN W.  
259 CORAL WAY  
JACKSONVILLE BEACH FL

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY - ST - ZIP  
S  
FORREST, HELEN F.  
259 CORAL WAY  
JACKSONVILLE BCH FL

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Allen W. Forrest

1/24/96

904/246-1040

CR2E034 (12/95)