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 JUN 15 AM 11:

DOCUMENT # **M95388** **(8)**

1. Corporation Name
LAMAR SHAW PROPERTIES, INC.

Principal Place of Business
118 W. ADAMS STREET
JACKSONVILLE FL 32202

Mailing Address
118 W. ADAMS STREET
JACKSONVILLE FL 32202

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 08/23/1988
3a. Date of Last Report: 05/31/1994

2. Principal Place of Business	2a. Mailing Address	4. FEI Number: 59-2903234	☐ Applied For ☐ Not Applicable
21 1601 Riverside Ave.	26 1601 Riverside Ave.		
Suite, Apt. #, etc.	Suite, Apt. #, etc.	5. Certificate of Status Desired ☐	$8.75 Additional Fee Required
22 Bld 2, Suite 1650	27 Bld. 2, Suite 1650		
City & State	City & State	6. Election Campaign Financing Trust Fund Contribution ☐	$5.00 May Be Added to Fees
23 Jacksonville, FL	28 Jacksonville, FL		
Zip / Country	Zip / Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No	
24 32204 / 25 U.S.	29 32204 / 30 U.S.		

9. Name and Address of Current Registered Agent

SHAW, RALPH L JR.
118 W. ADAMS STREET
JACKSONVILLE FL 32202

10. Name and Address of New Registered Agent

81 Name: Shaw, Ralph L. Jr.
82 Street Address (P.O. Box Number is Not Acceptable): 1601 Riverside Ave
83 Bld 2, Suite 1650
84 City: Jacksonville FL 85 Zip Code: 32204

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 _____ DATE
(Typed or printed name of registered agent and title if applicable) (Registered Agent signature required when changed)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PS	11 TITLE	☐ Change ☐ Addition
NAME	SHAW, RALPH L JR	12 NAME	
STREET ADDRESS	4275 TIMUQUANA ROAD	13 STREET ADDRESS	
CITY ST ZIP	JACKSONVILLE FL 32210	14 CITY ST ZIP	
TITLE	~~AS~~	21 TITLE	Treasurer & Secretary ☒ Change ☒ Addition
NAME	ADDISON, GRAFTON D	22 NAME	John T. Thornton
STREET ADDRESS	11788 WOODSWORTH COURT	23 STREET ADDRESS	1601 Riverside Ave, Bld. 2, Suite 1650
CITY ST ZIP	JACKSONVILLE FL	24 CITY ST ZIP	Jacksonville, FL 32204
TITLE	T	31 TITLE	☐ Change ☐ Addition
NAME	SCHULTZ, JOHN R	32 NAME	
STREET ADDRESS	1823 SEMINOLE ROAD	33 STREET ADDRESS	
CITY ST ZIP	JACKSONVILLE FL	34 CITY ST ZIP	
TITLE	S	41 TITLE	☐ Change ☐ Addition
NAME	FOSTER, SCOTT R	42 NAME	
STREET ADDRESS	1814 FELCH AVE	43 STREET ADDRESS	
CITY ST ZIP	JACKSONVILLE FL	44 CITY ST ZIP	
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY ST ZIP		54 CITY ST ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY ST ZIP		64 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)(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 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: Ralph Lamar Shaw, Jr. 6/14/95 (904)358-0900
SIGNATURE AND TYPED OR PRINTED NAME OF MAKING OFFICER OR DIRECTOR — Date — Daytime Phone #

0013470 CP