## FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT #	N93000001187	(4)
1 Corporation Name	140000001101	17/

## GADSDEN COMMON CENT\$ INC.

Dringing Direct	of Business	Adaltas Addiss			
Principal Place	soi prisidess	Mailing Address			
RT. 1 BOX 7		RT. 1 BOX 74			
QUINCY FL : US	32351	QUINCY FL 32351 US			
		<del></del>		3. Date Incorporated or Qualified	3a. Date of Last Report
2 Principal Pla	ace of Business	2a. Mailing Address		03/09/1993 4. FEI Number	05/01/1995 Applied For
יים מבו ביים ביים ביים ביים ביים ביים ביים בי	Bex 1368	26 RT3 Box	n = /_P	59-3172591	Not Applicable
Suite, Apt.		Suite, Apt. #, etc.			. ¢0.75
22		27		5. Certificate of Status Desired	Fee Required
City & State City & State		City & State		6. Election Campaign Financing	5.00 May Be
	INCY FLERICA	28 QUINC	<del></del>	Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for int	
24 32	9, Name and Address of Curren		30 GADSDEN	Florida Statutes  10. Name and Address of New Re	Yes WNo
	g. Rame and Address Of Conten	r vedieteren viderir	81 Name	10. Name Bild Address of New Ke	distaled Agent
D400E	T MADI FAIR D		L. L. E	DWARD & ME	LANE
	IT, MARLENE R		82 Street Add	dress (P.O. Box Number is Not Acceptable	<b>)</b>
RT. BOX			83	T 3 Bax 2-368	
QUINCT	FL 32351				
			84 City	Russella	FL 85 3235/
11. Pursuant t	to the provisions of Sections 617.0502	and 617.1508. Florida Stati	rtes, the above-named corpo	AUINCY vation submits this statement for the numb	
or register	ed agent, or both, in the State of Floric th, and accept the obligations of, Secti	la. Such change was author	ized by the corporation's box	oration submits this statement for the purporation of directors. I hereby accept the appoin	ntment as registered agent. I am
	in, and accept the colligations of, secti	on 62.0503, Pionda Statute	s Edward C. Melane	50,045,00	
SIGNATURE _	Signature, typeo or printed name of registered agent	end title if applicable.	IOTE Registered Agent signature require		4-25-96
12.	OFFICERS AND	DIRECTORS	13.	ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTORS IN 12
TITLE	D	DDELETE	1.1 TITLE		Change Addition
NAME	SALTERS, GUS		1.2 NAME		
STREET ADDRESS	RT. 2 BOX 122 F.		1.3 STREET ADDRESS		
CITY - ST - ZIP	QUINCY FL		1.4 CITY - ST - ZIP		
TITLE	D	DELETE	2.1 TITLE		Change Addition
NAME	HARVEY, CHARLOTTE		2.2 NAME		
STREET ADDRESS	RT. 2 BOX 120		2.3 STREET ADDRESS		
CITY-ST-ZIP	QUINCY FL		2.4 CITY-ST-ZIP		
TITLE	<b>D</b> .	DELETE	3.1 TITLE		Change Addition
NAME	DUNSON, JAMES		3.2 NAME		
STREET ADDRESS	RT. 3 BOX 2506		3 3 STREET ADDRESS		
CITY-ST-ZIP	QUINCY FL	Nonere	3 4. CITY-ST-ZIP	SECRUTARY	
TITLE	D	DELETE		Edward C. Melane	Change 🔛 Addition
NAME	BREWER, BERTIE		4. 2 NAME	R.R. 3 Box 2368	
STREET ADDRESS	RT. 5 BOX 56		4.3 STREET ADDRESS	Quincy, Ft. 32351-9515	
CITY-ST-ZIP	QUINCY FL	□ DELETE	4.4 CITY-ST-ZIP		
TITLE	D DOWN D	DEFELE	5 1 TITLE		☐ Change ☐ Addition
NAME CIRCL ADDRESS	BAGGETT, RONALD J		5.2 NAME		
STREET ADDRESS	RT. 1 BOX 74		5.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	QUINCY FL	DELETE	5 4 CITY-ST-ZIP		Change Addition
NAME	D CARTER ARCHIE M	Phereig	61 TITLE		The results The Vocalion
	CARTER, ARCHIE M		6.2 NAME	•	
STREET ADDRESS	RT. 7 BOX 3996		6.3 STREET ADDRESS		
CITY-ST-ZIP	QUINCY FL  v. certify that the information supplied v	with this filing is voluntarily for	64 CITY-ST-ZIP	for the exemption stated in Section 119.0	7(3)(k) Florida Statutos I further
certify that	t the information indicated on this annu	al report or supplemental an	nual report is true and accur	ate and that my signature shall have the sa	ame legal effect as if made under
oath; that appears in	I am an officer or director of the corpo n Block 12 or Block 13 if changed, or c	ration or the receiver or trust in an attachment with an ark	ee empowered to execute th dress.	is report as required by Chapter 617, Flori	da Statutes; and that my name
appears in	i block iz or block is il changed, or d	ri an attachinent with an aok	JI 692.		

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

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4-25-94 627-7/94
Dete Daytime Phone 1