

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P15418 (7)

1. Corporation Name

SKINNER'S FURNITURE STORE OF BREWTON, INCORPORATED

Principal Place of Business

Mailing Address

123 MILDRED ST
BREWTON AL 36426
US Brewton,

P.O. BOX 628
WEST POINT GA 31833



3. Date Incorporated or Qualified

07/31/1987

3a. Date of Last Report

03/20/1995

2. Principal Place of Business

2a. Mailing Address

21

26

P.O. Box 389

4. FEI Number

63-0399200

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

HOSKIN, CHARLES P.
314 SOUTH BAYLEN STREET
SUITE 201
PENSACOLA FL 32501

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 title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE CD
NAME SKINNER, O.G.
STREET ADDRESS 1009 N. LANIER AVE
CITY-ST-ZIP LANETT AL ☒ DELETE

1.1 TITLE Vice Chairman/D
1.2 NAME Reeves, Charles
1.3 STREET ADDRESS 1009 N. Lanier Ave
1.4 CITY-ST-ZIP Lanett, AL 36863 ☐ Change ☒ Addition

TITLE V
NAME CRAFT, JACK J.
STREET ADDRESS 1009 LANIER AVENUE
CITY-ST-ZIP LANETT AL ☐ DELETE

2.1 TITLE V/O.
2.2 NAME McLane, Dan
2.3 STREET ADDRESS 1009 N. Lanier Ave
2.4 CITY-ST-ZIP Lanett, AL 36863 ☐ Change ☒ Addition

TITLE ST
NAME CULBRETH, R.E.
STREET ADDRESS 1009 N LANIER AVENUE
CITY-ST-ZIP LANETT AL ☒ DELETE

3.1 TITLE VST/D
3.2 NAME McLane, Tim
3.3 STREET ADDRESS 1009 N. Lanier Ave
3.4 CITY-ST-ZIP Lanett, AL 36863 ☐ Change ☒ Addition

TITLE D
NAME REEVES, FRANCES S.
STREET ADDRESS 1009 N. LANIER AVENUE
CITY-ST-ZIP LANETT AL ☐ DELETE

4.1 TITLE CD
4.2 NAME Frances Reeves
4.3 STREET ADDRESS 1009 N. Lanier Ave
4.4 CITY-ST-ZIP Lanett, AL 36863 ☒ Change ☐ Addition

TITLE D
NAME STEELE, CAROLYN S.
STREET ADDRESS 1009 N. LANIER AVENUE
CITY-ST-ZIP LANETT AL ☒ DELETE

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE D
NAME STEELE, H.E.
STREET ADDRESS 1009 N. LANIER AVENUE
CITY-ST-ZIP LANETT AL ☒ DELETE

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP ☐ Change ☐ Addition

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

Tim McLane

Date

Daytime Phone: #

334 644 2336

CR2E034 (12/95)