FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

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

DOCUMENT # **P26994** **(4)**

1. Corporation Name

PUMP AND SAVE, INC.

Principal Place of Business	Mailing Address
453 NORTH MILL ST JACKSON MS 39202	453 NORTH MILL ST JACKSON MS 39202

3. Date Incorporated or Qualified: **11/21/1989**
3a. Date of Last Report: **02/01/1995**

2. Principal Place of Business (21): Suite, Apt. #, etc. (22): City & State (23): Zip (24): Country (25)

2a. Mailing Address (26): Suite, Apt. #, etc. (27): City & State (28): Zip (29): Country (30)

4. FEI Number: **64-0779730** ☐ 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

HILL, LARRY
MOORE, HILL & WESTMORELAND
SUN BANK TOWER, 220 W. GARDEN ST.
PENSACOLA FL 32598-1792

10. Name and Address of New Registered Agent

81 Name

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

83 200001872442
-06/24/96--01019--010
84 City ***200.00 **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 _____ DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	CPD	☐ DELETE	11 TITLE	CD	☒ Change ☐ Addition
NAME	HOLMAN W H JR		12 NAME		
STREET ADDRESS	453 N MILL ST		13 STREET ADDRESS	1770 Ellis Ave., Suite 200	
CITY-ST-ZIP	JACKSON MS		14 CITY-ST-ZIP	JACKSON, MS 39204-3613	
TITLE	VD	☒ DELETE	21 TITLE	P	☐ Change ☒ Addition
NAME	MCCARTY, W.B., JR.		22 NAME	W. H. HOLMAN, III	
STREET ADDRESS	453 N. MILL STREET		23 STREET ADDRESS	1770 Ellis Ave., Suite 200	
CITY-ST-ZIP	JACKSON MS		24 CITY-ST-ZIP	JACKSON, MS 39204-3613	
TITLE	VSD	☐ DELETE	31 TITLE	D	☒ Change ☐ Addition
NAME	FRIOU, ROGER P.		32 NAME		
STREET ADDRESS	453 N. MILL STREET		33 STREET ADDRESS	1770 Ellis Ave., Suite 200	
CITY-ST-ZIP	JACKSON MS		34 CITY-ST-ZIP	JACKSON, MS 39204-3613	
TITLE	TC	☐ DELETE	41 TITLE	V AS	☒ Change ☐ Addition
NAME	BLACK, DAVID R		42 NAME		
STREET ADDRESS	453 N MILL ST		43 STREET ADDRESS	1770 Ellis Ave., Suite 200	
CITY-ST-ZIP	JACKSON MS		44 CITY-ST-ZIP	JACKSON, MS 39204-3613	
TITLE	AT	☐ DELETE	51 TITLE	TC	☒ Change ☐ Addition
NAME	WALKER, EARL D		52 NAME		
STREET ADDRESS	453 N MILL ST		53 STREET ADDRESS	1770 Ellis Ave., Suite 200	
CITY-ST-ZIP	JACKSON MS		54 CITY-ST-ZIP	JACKSON, MS 39204-3613	
TITLE	D	☒ DELETE	61 TITLE	V	☐ Change ☒ Addition
NAME	HOLMAN, CHARLES H., JR.		62 NAME	DAVID K. ESSARY	
STREET ADDRESS	453 N. MILL STREET		63 STREET ADDRESS	1770 Ellis Ave., Suite 200	
CITY-ST-ZIP	JACKSON MS		64 CITY-ST-ZIP	JACKSON, MS 39204-3613	

CR2E034 (12/95)

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: Earl D. Walker 6/11/96 (601) 948-0361

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

(EARL D WALKER)