

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 # P29970 (1)

1. Corporation Name

SIMMONS & BISHOP CO., INC.

Principal Place of Business

13402 NORTH SCOTTSDALE, SUITE A120  
SCOTTSDALE AZ 85254

Mailing Address

13402 NORTH SCOTTSDALE, SUITE A120  
SCOTTSDALE AZ 85254



3. Date Incorporated or Qualified  
06/28/1990

3a. Date of Last Report  
05/01/1995

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

4. FEI Number

75-2186830

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

CT CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION FL 33324

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 P ☒ DELETE

NAME BLACKLEY, JOHN B.  
STREET ADDRESS 13843 N. TATUM BLVD., #5-192  
CITY-ST-ZIP PHOENIX AZ

1.1 TITLE President ☐ Change ☒ Addition

1.2 NAME Dennis Dixon  
1.3 STREET ADDRESS 1403 N 61st Place  
1.4 CITY-ST-ZIP Mesa, AZ 85205

TITLE V ☒ DELETE

NAME SCHEIBEL, J. AUSTIN  
STREET ADDRESS 3550 BAY SANDS DR., SUITE 1061  
CITY-ST-ZIP LAUGHLIN NV

2.1 TITLE Vice President ☐ Change ☒ Addition

2.2 NAME Kory Kemp  
2.3 STREET ADDRESS 4332 E Sunrise Dr.  
2.4 CITY-ST-ZIP Phoenix, AZ 85044

TITLE STD ☒ DELETE

NAME SIMMONS, EVELYN K.  
STREET ADDRESS 6619 64TH PLACE  
CITY-ST-ZIP PARADISE VALLEY AZ

3.1 TITLE CFO, Sec., Treas. ☐ Change ☒ Addition

3.2 NAME Jeannie Gilson  
3.3 STREET ADDRESS 34831 N 3rd St.  
3.4 CITY-ST-ZIP New River, AZ 85027

TITLE D ☒ DELETE

NAME SIMMONS, WILLIAM I.  
STREET ADDRESS 6619 64TH PLACE  
CITY-ST-ZIP PARADISE VALLEY AZ

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME  
6.3 STREET ADDRESS  
6.4 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

JEANNIE GILSON

1/17/96

602/998-5757

CR2E034 (12/95)