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

APPROVED AND FILED
95 MAY -1 PM 3:18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P32600 (9)

1. Corporation Name
JIMCO OF ROCK HILL, INC.

Principal Place of Business
15503 LEE HWY
BRISTOL VA 24701
US

Mailing Address
15503 LEE HWY
BRISTOL VA 24701
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 01/25/1991
3a. Date of Last Report: 04/01/1994
4. FEI Number: 57-0895844 ☐ 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

2. Principal Place of Business	2a. Mailing Address
21 3372 Blue Jay Pass	26 3372 Blue Jay Pass
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23 Fort Mill, SC	City & State 28 Fort Mill, SC
Zip 24 29715 Country 25 US	Zip 29 29715 Country 30 US

9. Name and Address of Current Registered Agent
BARTLOME, VINCE
1012 GIRVIN RD
JACKSONVILLE FL 32225

10. Name and Address of New Registered Agent
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	PD	11 TITLE	PD ☒ Change ☐ Addition
NAME	MULLINS, WILLIAM C., JR.	12 NAME	Jim Wyatt
STREET ADDRESS	15503 LEE HWY	13 STREET ADDRESS	3372 Blue Jay Pass
CITY ST ZIP	BRISTOL VA	14 CITY ST ZIP	Fort Mill, SC 29715
TITLE	S	21 TITLE	STD ☒ Change ☐ Addition
NAME	WATSON, ANN	22 NAME	Joyce Wyatt
STREET ADDRESS	15503 LEE HWY	23 STREET ADDRESS	3372 Blue Jay Pass
CITY ST ZIP	BRISTOL VA	24 CITY ST ZIP	Fort Mill, SC 29715
TITLE	TD	31 TITLE	D ☒ Change ☐ Addition
NAME	MEADOWS, BOBBY E.	32 NAME	Shauna Wyatt
STREET ADDRESS	15503 LEE HWY	33 STREET ADDRESS	3372 Blue Jay Pass
CITY ST ZIP	BRISTOL VA	34 CITY ST ZIP	Fort Mill, SC 29715
TITLE	VD	41 TITLE	☐ Change ☐ Addition
NAME	WYATT, JIM	42 NAME	
STREET ADDRESS	3372 BLUE JAY PASS	43 STREET ADDRESS	
CITY ST ZIP	FORT MILL SC	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: J Wyatt James Wyatt, Pres 4/30/95 803-548-6797
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

0486063 FN