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 # **P39356** **(1)**

1. Corporation Name

PALATKA WINNELSON CO.

Principal Place of Business

615 N PALM AVE.
PALATKA FL 32177
US

Mailing Address

C/O DAPSCO DAYTON, INC.
777 LIBERTY LANE
DAYTON OH 45449

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

3. Date Incorporated or Qualified: 06/23/1992

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

4. FEI Number: 59-3124715 — 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

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301

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 must sign in ink when filing by mail) — DATE

12. OFFICERS AND DIRECTORS

TITLE	PD	[✓] DELETE
NAME	JARRETT, JOSEPH A SR.	
STREET ADDRESS	5419 FT CAROLINE RD.	
CITY-ST-ZIP	JACKSONVILLE FL	
TITLE	D	[ ] DELETE
NAME	ARCHER, WILLIAM	
STREET ADDRESS	125 SOUTH 7TH STREET	
CITY-ST-ZIP	JACKSONVILLE BCH FL	
TITLE	ST	[ ] DELETE
NAME	FRY, BENJAMIN	
STREET ADDRESS	777 LIBERTY LANE	
CITY-ST-ZIP	DAYTON OH	
TITLE	D	[ ] DELETE
NAME	OSENBAUGH, JACK	
STREET ADDRESS	3110 KETTERING BLVD.	
CITY-ST-ZIP	DAYTON OH	
TITLE	D	[ ] DELETE
NAME	COLLINS, CHARLES J	
STREET ADDRESS	1618 INDUSTRIAL PARK CR.	
CITY-ST-ZIP	MOBILE AL	
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE		[ ] Change [ ] Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE		[ ] Change [ ] Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		[ ] Change [ ] Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		[ ] Change [ ] Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		[ ] Change [ ] Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE	D	[ ] Change [✓] Addition
6.2 NAME	John Lapour	
6.3 STREET ADDRESS	3120 Kettering Blvd.	
6.4 CITY-ST-ZIP	Dayton OH 45439	

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: Benjamin Fry, Benjamin Fry — SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — MAR 3 1996 — DATE — (513) 847-8256 — DAYTIME PHONE #

CR2E034 (12/95)