

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

**CORPORATION
ANNUAL REPORT
1995**



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

**APPROVED
AND
FILED**

95 FEB 27 AM 12:08

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P93000005680 (2)

1. Corporation Name

PANHANDLE WELDING & MANUFACTURING, INC.

Principal Place of Business

**405 HIGHWAY 90 WEST
BONIFAY FL 32425**

Mailing Address

**405 HIGHWAY 90 WEST
BONIFAY FL 32425**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/19/1993

3a. Date of Last Report

05/01/1994

4. FEI Number

59-3166877

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

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

9. Name and Address of Current Registered Agent

**LOCKE, HERBERT JR
405 HIGHWAY 90 WEST
BONIFAY FL 32425**

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)

(Signature typed or printed name of registered agent and title if applicable)

(Signature typed or printed name of registered agent and title if applicable)

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY ST ZIP
**P
LOCKE, HERBERT JR.
RT. 2 BOX 297A
BONIFAY FL 32425**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE
2. NAME
3. STREET ADDRESS
4. CITY ST ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

5. TITLE
6. NAME
7. STREET ADDRESS
8. CITY ST ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

9. TITLE
10. NAME
11. STREET ADDRESS
12. CITY ST ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

13. TITLE
14. NAME
15. STREET ADDRESS
16. CITY ST ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

17. TITLE
18. NAME
19. STREET ADDRESS
20. CITY ST ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

21. TITLE
22. NAME
23. STREET ADDRESS
24. 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 description stated in Sections 199.02(1)(b), Florida Statutes. I further certify that the information submitted 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 SIGNATURE OFFICER OR DIRECTOR

Herbert Locke Jr.
Herbert Locke Jr.

2-21-95

(904) 547-9354