

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED
Apr 23 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
--	---	--

DOCUMENT # P93000017537 (0)

1. Corporation Name

S AND G DISTRIBUTORS, INC.



Principal Place of Business 5606 US 27 N SEBRING FL 33870	Mailing Address 5606 US 27 N SEBRING FL 33870-1211
---	--

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 03/04/1993	3a. Date of Last Report 03/19/1996
21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.			4. FEI Number 65-0405892	Applied For Not Applicable
22. City & State	27. City & State			5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
23. Zip	28. Zip			6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
24. Country	29. Country			8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No	

9. Name and Address of Current Registered Agent SANDLIN, FRED J 5606 US 27 N SEBRING FL 33870		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	D	1.1 TITLE	☐ Change ☐ Addition
NAME	SANDLIN, FRED J	1.2 NAME	
STREET ADDRESS	4223 GRAND AVE	1.3 STREET ADDRESS	
CITY-ST-ZIP	SEBRING FL 33870	1.4 CITY-ST-ZIP	
TITLE	D	2.1 TITLE	☐ Change ☐ Addition
NAME	GAINES, ROBERT A	2.2 NAME	
STREET ADDRESS	6750 US 27 N	2.3 STREET ADDRESS	
CITY-ST-ZIP	SEBRING FL 33870	2.4 CITY-ST-ZIP	
TITLE	D	3.1 TITLE	☐ Change ☐ Addition
NAME	WELBORN, CHARLES	3.2 NAME	
STREET ADDRESS	220 HWY 27 SOUTH	3.3 STREET ADDRESS	
CITY-ST-ZIP	LAKE WALES FL	3.4 CITY-ST-ZIP	
TITLE	D	4.1 TITLE	☐ Change ☒ Addition
NAME	CANNON, ROY	4.2 NAME	
STREET ADDRESS	2322 WOODBINE AVENUE	4.3 STREET ADDRESS	
CITY-ST-ZIP	LAKELAND FL	4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing 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

[Signature]

FRED J. SANDLIN

(011) 207 8009

CR2E034 (9/96)