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

PROFIT CORPORATION ANNUAL REPORT



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

1996

DOCUM 1. Corporation I	MENT # P930	00021970 (7	7)		
•	NG BY MCGUIRES, INC.				
Principal Place of Business Mailing Address					# <b>#41</b> 81 80 819 12801 11010 10481 10011 6011 10881
600 E. GREGO PENSACOLA I		600 E. GREGORY ST PENSACOLA FL 3250			
				3. Date incorporated or Qualified 03/22/1993	3a. Date of Last Report 02/23/1995
2. Principal Place of Business		2a. Mailing Address		4. FEI Number	Applied For
21		26		59-3172785	Not Applicable  \$8.75 Additional
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	Fee Required
City & State	· · · · · · · · · · · · · · · · · · ·	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28 Zin	Country	Trust Fund Contribution  8. This corporation has liability for	Added to Fees
Zip <b>24</b>	Country 25	Zip <b>29</b>	30	Florida Statutes Yes	
	9. Name and Address of Curre	ent Registered Agent		10. Name and Address of New F	Registered Agent
			81 Name		
	WILLIAM M REGORY ST.		82 Street Add	lress (P.O. Box Number is Not Acceptat	nle)
PENSACOLA FL 32501			83		
			84 City	.,	85 Zip Code
or registere familiar with	d agent, or both, in the State of Flo n, and accept the obligations of, Se	orida. Such change was authori oction 607.0505, Florida Statute	zed by the corporation's boa is.	vation submits this statement for the pu and of directors. Thereby accept the app	rpase of changing its registered office ointiment as registered agent. I am
12.	lignature, typed or printed name of registered age OFFICERS A	IND DIRECTORS	ICTE Registereo Aquent signicit de respun		ICERS AND DIRECTORS IN 12
TITLE	D	DELETE	1. 1 TITLE		Change Addition
NAME	MARTIN, WILLIAM M		1 2 NAME		
STREET ADDRESS	600 E. GREGORY ST. PENSACOLA FL 32501		1 3 STREET ADDRESS 1 4 CITY - ST- ZIP		
CITY+ST-ZIP TITLE	D	DEL ETE	2 1 THLE		Change Addition
NAME	MARTIN, MOLLY M		2 2 NAME		
STREET ADDRESS	600 E. GREGORY ST.		2 3 STREET ADDRESS		
TITLE	PENSACOLA FL 32501	☐ DELETE	2.4 CITY+S1+7IP 3.1 TITLE		Change Addition
NAME		_	32 NAME		
STREET ADORESS			3 3 STREET ADDRESS		
CITY+ST+ZIP		DELETE	3.4 C(TY-S1-Z(P)		Change Addition
TITLE NAME			4.1 TIME 4.2 NAME		_ change _ chance
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-S1-ZIP			4.4 C/TY - ST ZIP		
TITLE		DELETE	5 1 TITLE		Change Addition
NAME.			5.2 NAME 5.3 STREET ADDRESS		
STREET ADDRESS  CITY-ST-ZIP			54 CITY-ST-ZIP		
TITLE		DELETE	6 1 TITLE		Change Addition
NAME	1	1	6.2 NAME		
STREET ADDRESS	, \ M		6.3 STREET ADDRESS		
CITY-ST-ZIP	certify that the information supple	d win this filing is columbarily fu	6.4 CHY-S1-ZIP	for the exemption stated in Section 119	).07(3)(k), Florida Statutes, 1 further
certify that oath; that I	r certify that the info mation supply the information indicated on this air am an officer or of equir of the for Block 12 or Block 13 if change, c	antidi roppet anteuntilamental ar	musi remort is true and accur	ale and that my signature shall have the his report as required by Chapter 607, F	e same legal effect as it made under

SIGNATURE:

3-18-96 (904) 433-6789

CR2E034 (12/95)