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PROFIT CORPORATION ANNUAL REPORT



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

1996

DOCUMENT # P93000022969 (8)

STEPHENS BUSINESS SERVICES, INC. Principal Place of Business Mailing Address 215 E WATER ST RT BOX 3327 BAINBRIDGE GA 31717 HAVANA FL 32333						
				3. Date Incorporated or Qualified	3a. Date of Last Re	
2. Principal Plac	of Duciness	Ta 1427		03/26/1993 4. FET Number	03/14/19	
21 Principal Plas	ce or business	2a. Mailing Address		59-3172151	F+-	Applied For
Suite, Apt. #,	etc.	Suite, Apt. #, etc.				Not Applicable Additional
22		27		5. Certificate of Status Desired		Required
City & State		City & State		6. Election Campaign Financing	\$5.00	0 May Be
23		28		Trust Fund Contribution	Added	d to Fees
Zip TTI	Country	- Z _I ρ	Country	8. This corporation has liability for		199.032,
24	25 9. Name and Address of Currer	29 Agent	30	Florida Statutes Yes	S Mo	
	3, Nume and Address of Outlet	it registered Agent	81 Name	10, Name and Address of New P	negistered Agent	
STEPHEN	NS, LEUCRETIA		20	20.0		
RT 1 BOX			82 Street Add	dress (P.O. Box Number is Not Acceptal	ble)	
	FL 32333		83			
			84 City	- 		
			84 City		FL 85 Zip	Code
familiar with	, and accept the obligations of Sect	ida. Such change was authoriz tion 607,0505. Elorida Statute:	rea by the corporation's books.	ard of directors. Thereby accept the app	onument as registered	agent. Lam
familiar with SIGNATURE	, and accept the obligations of. Sect	tion 607,0505, Florida Stafutes	3. Otali Pagi väred Åga disidrat ne reder	क दर पत्ती कर राक्षेत्रदर्द संकाहेंद	DA'E	
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14. Ido 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 comporation on 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: DELECTION STEPHENS LEUCTETIA Stephens SIGNATURE AND TYPED ORDERING OFFICER OR DIRECTOR

3-1-96 912-246-3807