FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

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

APPROVED AND FILED

95 MAY -1 AM 8:03

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P93000027365 (4)

1. Corporation Name

SOUTHERN ENTERAL SUPPLY, INC.

Principal Place of Business	Mailing Address
435 LUVERNE AVE PANAMA CITY FL 32401	435 LUVERNE AVE PANAMA CITY FL 32401

3. Date Incorporated or Qualified: 04/12/1993
3a. Date of Last Report: 04/18/1994
4. FEI Number: 59-3169724 — 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 Office Address	2a. Mailing Address
21 1612 N. Pace Blvd.	26 1612 N. Pace Blvd.
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 City & State: Pensacola, FL	28 City & State: Pensacola, FL
24 Zip: 32505 — 25 County: Escambia	29 Zip: 32505 — 30 County: Escambia

9. Name and Address of Current Registered Agent

PARMER, DONALD R
435 LUVERNE AVE
PANAMA CITY FL 32401

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable): 430 Harrison Ave.
83
84 City: Panama City, FL — 85 Zip Code: 32401

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

12. OFFICERS AND DIRECTORS	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE: D NAME: PARMER, DONALD R STREET ADDRESS: 350 MERCEDES AVE CITY-ST-ZIP: PANAMA CITY FL 32405	☒ Change ☐ Addition STREET ADDRESS: P.O. Box 47 CITY-ST-ZIP: Panama City, FL 32402
TITLE: D NAME: CLAYTON, RICHARD C STREET ADDRESS: 4029 HIGHWAY 90 CITY-ST-ZIP: PACE FL 32571	☐ Change ☐ Addition STREET ADDRESS: 1612 N. Pace Blvd. CITY-ST-ZIP: Pensacola, FL 32505
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

14. I hereby certify that the information supplied with this filing is substantially furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this 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: RCClayton — SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — R C Clayton

Date: 4/28/95 — Daytime Phone #: 904-435-8313

0029910 CP