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

PROFIT CORPORATION **ANNUAL REPORT**

1997

2. Principal Place of Business

Sulte, Apt. #, etc.

City & State

21

22



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000042575 (9)

C & B TRIM SHOP, INCORPORATED

Principal Place of Business Mailing Address 2728 EDWARD AVENUE PANAMA CITY FL 92405 2728 EDWARD AVENUE PANAMA CITY FL 32405-5814

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2a. Mailing Address

City & State

Suite, Apt. #, etc.

FILED Apr 25 1997 8:00am Secretary of State



3a. Date of Last Report

Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Not Applicable

07/18/1996

3. Date Incorporated or Qualified

06/10/1993

59-3186929

5. Certificate of Status Desired

6. Election Campaign Financing

23		28			Trust Fund Contribution [Added to	o Fees	
Zip	Country	Zip	Country	,	8. This corporation has liability for inta		199.032,	
24	25	29	30		Florida Statutes 🔀 Yes 🗌 No			
9, Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent 81 Name			
WOLAVER, CLARENCE J				Name				
2728 EDWARD AVENUE			82	82 Street Address (P.O. Box Number is Not Acceptable)				
PANAMA CITY FL 32405			83					
			53				ļ	
			84	City		FL 85 Zip C	Code	
11 Pursuant t	to the provisions of Sections 607.0	502 and 607 1508 Florida Statu	dae the abou	named co	progration submite this statement for the pure		e registered	
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 appreative (NOTE: Registered Agent signature required when reinstating) DATE								
12.		ND DIRECTORS .	13.	an agrature rec	ADDITIONS/CHANGES TO OFFICER		S IN 12	
TITLE	P	DELETE	111006			☐ Change	Addition	
NAME	WOLAVER, CLARENCE J		1.2 NAME	Ì			[:	
STREET ADDRESS	2728 EDWARD AVE		1.3 STREE	ADDRESS			17	
CITY-ST-ZIP	PANAMA CTY FL		1.4 CDY-5	T-ZIP				
TITLE	VP ·	DELETE	21 TITLE			☐ Change	Addition	
NAME	WOLAVER, REBECCA		2.2 NAME]				
STREET ADDRESS	2728 EDWARD AVE		23 STREE	AODRESS			1	
CITY-ST-ZIP	PANAMA CTY FL		2. 4 CHY-	S1 - ZIP				
TITLE	D	DELETE	3 1 11TLE			☐ Change	Addition	
NAME	COOK, DARLENE W.		3.2 NAME	Į			(
STREET ADDRESS	2729 CAROL LANE		3 3 STREE	ADDRESS				
CITY-ST-ZIP	PANAMA CTY FL		3,4 CITY-					
TITLE	D	DELETE	4.1 TITLE	D		🗷 Change	Addition	
NAME	WOLAVER, JR C		4. 2 NAMÉ	l l	JOLAVER, DR C		ļ	
STREET ADDRESS	3907 E 11TH ST				850-8 Harrison ave		1	
CITY-ST-ZIP	PANAMA CTY FL	DELETE	4.4 CITY - 5	11 - ZIP Y	anama City FL	Change	Addition	
TITLE NAME			51 TITLE			L Griange	LI Addition	
			5.2 NAME	*********				
STREET ADDRESS			5.3 STREE	ì			ſ	
CITY-ST-ZIP TITLE		DELETE	5.4 C/TY - 5	11-218		Change	Addition	
NAME		Land Darrie	6.2 NAME)		Change		
STREET ADDRESS	!		6.3 STREE	ADDRESS			1	
CITY-ST-ZIP	•		6.4 Cily -					
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 roport or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that								

Tam 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.