FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 FEB 17 PM 3:16

DOCUMENT # P93000054553 (1)

1. Corporation Name
ALAN LAFLIN INC.

Principal Place of Business	Mailing Address
946-D HOWARD ST. NICEVILLE FL 32578	946-D HOWARD ST. NICEVILLE FL 32578

DO NOT WRITE IN THIS SPACE

3. Date Business Started or Qualified: 08/02/1993
3a. Date of Last Report: 03/04/1994

2. Principal Place of Business (21)
2a. Mailing Address (26)
Suite, Apt. #, etc. (22) (27)
City & State (23) (28)
Zip (24) Country (25) Zip (29) Country (30)

4. FEI Number: 59-3193466 — 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 was listed for automobile tax under S. 320.02, Florida Statutes: X Yes ☐ No

9. Name and Address of Current Registered Agent

LAFLIN, ALAN P
946 D HOWARD ST
NICEVILLE FL 32578

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 _____ DATE _____

12. OFFICERS AND DIRECTORS	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE P NAME LAFLIN, ALAN STREET ADDRESS 946 D HOWARD ST CITY-ST-ZIP NICEVILLE FL	11 TITLE ☐ Change ☐ Addition 12 NAME 13 STREET ADDRESS 14 CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP	21 TITLE V ☐ Change X Addition 22 NAME Richard D. Bowden 23 STREET ADDRESS 946-D Howard Street 24 CITY-ST-ZIP Niceville, FL 32578
TITLE NAME STREET ADDRESS CITY-ST-ZIP	31 TITLE V ☐ Change X Addition 32 NAME Phillip Gygi 33 STREET ADDRESS 946-D Howard Street 34 CITY-ST-ZIP Niceville, FL 32578
TITLE NAME STREET ADDRESS CITY-ST-ZIP	41 TITLE S ☐ Change X Addition 42 NAME Jonathan Bell 43 STREET ADDRESS 946-D Howard Street 44 CITY-ST-ZIP Niceville, FL 32578
TITLE NAME STREET ADDRESS CITY-ST-ZIP	51 TITLE ☐ Change ☐ Addition 52 NAME 53 STREET ADDRESS 54 CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP	61 TITLE ☐ Change ☐ Addition 62 NAME 63 STREET ADDRESS 64 CITY-ST-ZIP

14. To the best of my knowledge and belief, this report is true, complete, and accurate, and is filed in good faith. I am a director or officer 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 above, or on an attachment with an address.

SIGNATURE: X Alan Laflin — ALAN LAFLIN — 2-10-95 — 904-862-2564
SIGNATURE AND TYPE OR PRINT NAME OF DIRECTOR OR OFFICER — DATE — DAYTIME TELEPHONE NUMBER

0471164 FD