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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 FEB 17 PM 3:16

DOCUMENT # P93000054700 (8)

1. Corporation Name
TERRY PARISH INC.

Principal Place of Business
1685 GLENBURN CT.
NICEVILLE FL 32578

Mailing Address
1685 GLENBURN CT.
NICEVILLE FL 32578

PLEASE WRITE IN THIS SPACE

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

2. Principal Place of Business
21
Suite, Apt. #, etc.
22
City & State
23
Zip 24 Country 25

2a. Mailing Address
26
Suite, Apt. #, etc.
27
City & State
28
Zip 29 Country 30

4. FEI Number: 59-3193456
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

9. Name and Address of Current Registered Agent
PARISH, TERRY W
1685 GLENBURN CT.
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
Signature, typed or printed name of registered agent, Title of Officer — Note: Registered Agent of a corporation cannot sign — Date

12. OFFICERS AND DIRECTORS

TITLE	P
NAME	PARISH, TERRY
STREET ADDRESS	1685 GLENBURN CT
CITY-ST-ZIP	NICEVILLE FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	☐ Change ☐ Addition
12 NAME	
13 STREET ADDRESS	
14 CITY-ST-ZIP	
21 TITLE	V ☐ Change ☒ Addition
22 NAME	Curtis Burnham
23 STREET ADDRESS	1685 Glenburn CT.
24 CITY-ST-ZIP	Niceville, FL 32578
31 TITLE	T ☐ Change ☒ Addition
32 NAME	Jimmy Burnham
33 STREET ADDRESS	1685 Glenburn CT.
34 CITY-ST-ZIP	Niceville, FL 32578
41 TITLE	☐ Change ☐ Addition
42 NAME	
43 STREET ADDRESS	
44 CITY-ST-ZIP	
51 TITLE	☐ Change ☐ Addition
52 NAME	
53 STREET ADDRESS	
54 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, I certify that the information indicated on this report or supplemental report is true and accurate and that my electronic filing fee payment has been received or will be received by the Department of State in payment of the filing fee due for this report. I further certify that I am an officer or director of the corporation or the registered agent designated to accept service of process for the corporation named in this report, or other officer or agent authorized to execute this report on behalf of the corporation. I understand that pursuant to Section 817.155, Florida Statutes, any person who knowingly makes a false statement in a report or application required by the Florida Business Corporation Act with intent to mislead a public servant in the performance of his official duty shall be guilty of a felony of the third degree, punishable as provided in s. 775.082, s. 775.083, or s. 775.084, Florida Statutes.

SIGNATURE: [signature] Terry Parish 2-10-95 704-862-2584
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

0471210 FP