

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **P94000000568 (3)**

1. Corporation Name

SCOTT-MCRAE TRADING COMPANY



Principal Place of Business

**1725 MEMORIAL PARK DR.
JACKSONVILLE FL 32204**

Mailing Address

**1725 MEMORIAL PARK DR.
JACKSONVILLE FL 32204**

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt., etc.

Suite, Apt., etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

**WIKER, PAMELA L
1725 MEMORIAL PARK DR.
JACKSONVILLE FL 32204**

3. Date Incorporated or Qualified

12/23/1993

3a. Date of Last Report

02/01/1995

4. FET Number

59-3215359

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

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 607.0607 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 607.0607, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

TITLE

D

☐ DELETE

NAME

**MCRAE, WALTER A JR
1725 MEMORIAL PARK DR.
JACKSONVILLE FL 32204**

STREET ADDRESS

CITY - ST - ZIP

TITLE

D

☐ DELETE

NAME

**SCOTT, JACK L
1725 MEMORIAL PARK DR.
JACKSONVILLE FL 32204**

STREET ADDRESS

CITY - ST - ZIP

TITLE

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NAME

**GRAHAM, HENRY H JR
1725 MEMORIAL PARK DR.
JACKSONVILLE FL 32204**

STREET ADDRESS

CITY - ST - ZIP

TITLE

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☐ DELETE

NAME

**HERZOG, GERALD W
1725 MEMORIAL PARK DR.
JACKSONVILLE FL 32204**

STREET ADDRESS

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