

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

CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # P94000002290 (2)

1. Corporation Name
ABBSMITH, INC.

FILED

95 JAN 27 PM 3:44

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
25 WALTER MARTIN ROAD N.E.
FORT WALTON BEACH FL 32548

Mailing Address
25 WALTER MARTIN ROAD N.E.
FORT WALTON BEACH FL 32548

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified 01/03/1994	3a. Date of Last Report
4. FEI Number 59-3222985	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 Place of Business 21 506 HIGHWAY 98 Suite, Apt. #, etc.	2a. Mailing Address 26 506 HIGHWAY 98 Suite, Apt. #, etc.
22 City & State DESTIN FL.	27 City & State DESTIN, FL.
23 Zip 32541	28 Country U.S.
24 32541	25 U.S.
29 32541	30 U.S.

9. Name and Address of Current Registered Agent

GRIMSLEY, JAMES W
25 WALTER MARTIN ROAD N.E.
FORT WALTON BEACH FL 32548

10. Name and Address of New Registered Agent

81 Name WILLIAM W. ABBOTT JR
82 Street Address (P.O. Box Number is Not Acceptable) 506 HIGHWAY 98
83
84 City DESTIN
85 FL
86 Zip Code 32541

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 fee if applicable)

(If: Registered Agent signature required when renouncing)

DATE

WILLIAM W. ABBOTT JR 1/21/95

12. OFFICERS AND DIRECTORS

TITLE	D
NAME	GRIMSLEY, JAMES W
STREET ADDRESS	25 WALTER MARTIN ROAD N.E.
CITY-ST-ZIP	FORT WALTON BEACH FL 32548

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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

1.1 TITLE	D	☒ Change ☐ Addition
1.2 NAME	WILLIAM W. ABBOTT JR	
1.3 STREET ADDRESS	506 HIGHWAY 98	
1.4 CITY-ST-ZIP	DESTIN, FL. 32541	

2.1 TITLE		☐ Change ☐ Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		

3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		

4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		

5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		

6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is accurately furnished and does not qualify for the exemption stated in Section 110.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual 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 officer or director of the corporation authorized 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 addition form with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

WILLIAM W. ABBOTT JR 1/21/95 (904) 654-4437