FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

P 94 0000 10670

CORPORATION ANNUAL REPORT 1996

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

DOCUMENT #

1. Corporation Name: SENTRY CAPITAL CORPORATION

700001840377
-05/28/96--01024--027
***1125.00

DO NOT WRITE IN THIS SPACE

Principal Place of Business / Mailing Address:
3494-1 Phillips Highway
Jacksonville, Florida Duval
32207

3. Date Incorporated or Qualified: FEB. '94	3a. Date of Last Report: JULY '95
4. FEI Number: 59-3220217	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	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

9. Name and Address of Current Registered Agent:
PADRAIC EOIN Mulvihill, Suite 100
CORPORATE SECRETARY
3500 Phillips Highway
JACKSONVILLE, FL. 32207

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: Padraic Eoin Mulvihill — NOTE: Registered Agent signature required when reinstating — DATE: MAY 4, 1996

12. OFFICERS AND DIRECTORS	
TITLE	PRESIDENT / DIRECTOR
NAME	JAMES R. JOHNSON
STREET ADDRESS	3500 Phillips Highway
CITY-ST-ZIP	Jacksonville, FL. 32207
TITLE	SECRETARY / DIRECTOR
NAME	PADRAIC EOIN Mulvihill
STREET ADDRESS	3500 Phillips Highway,
CITY-ST-ZIP	Jacksonville, FL. 32207
TITLE	TREASURER
NAME	PATRICIA D. SMITH
STREET ADDRESS	3500 Phillips Highway
CITY-ST-ZIP	Jacksonville, FL. 32207
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	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
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	

Jacksonville, FL. 32207

5/11

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(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 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.

SIGNATURE: Padraic Eoin Mulvihill Secretary May 4, 1996
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR