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

APPROVED AND FILED
95 APR 27 PM 12: 37
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000023985 (2)

1. Corporation Name

FOCO OF FLORIDA, INC.

Principal Place of Business	Mailing Address
%WILLIAM SCOTT FOSTER 909 MAR WALT DRIVE, SUITE 1014 FT WALTON BEACH FL 32547	%WILLIAM SCOTT FOSTER 909 MAR WALT DRIVE, SUITE 1014 FT WALTON BEACH FL 32547

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business: 31 W. Garden St., ~~Ste 101~~	2a. Mailing Address: P O Box 12358
Suite, Apt. #, etc: Suite 101	Suite, Apt. #, etc.:
City & State: Pensacola, FL	City & State: Pensacola, FL ~~32~~
Zip: 32501 Country:	Zip: 32501 Country:

3. Date Incorporated or Qualified: 03/25/1994
3a. Date of Last Report:
4. FEI Number: 59-3284300 ☐ 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	10. Name and Address of New Registered Agent
FOSTER, WILLIAM S 909 MAR WALT DRIVE, SUITE 1014 FT WALTON BEACH FL 32547	Name: Garrett W. Walton Street Address (P.O. Box Number is Not Acceptable): 31 West Garden Street Suite 101 City: Pensacola FL Zip Code: 32501

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: Garrett W. Walton DATE: 4/10/95

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	☐ Change ☐ Addition
NAME	FOSTER, WILLIAM S	1.2 NAME	Delete
STREET ADDRESS	~~909 MAR WALT DRIVE, SUITE 1014~~	1.3 STREET ADDRESS	
CITY ST ZIP	~~FT WALTON BEACH FL 32547~~	1.4 CITY ST ZIP	
TITLE		2.1 TITLE	D, V ☐ Change ☒ Addition
NAME		2.2 NAME	FOSTER, CLIFFORD
STREET ADDRESS		2.3 STREET ADDRESS	3800 Airport Blvd, Ste 102
CITY ST ZIP		2.4 CITY ST ZIP	Mobile, AL 36608
TITLE		3.1 TITLE	D, V ☐ Change ☒ Addition
NAME		3.2 NAME	MATHEWS, LYNNE FOSTER
STREET ADDRESS		3.3 STREET ADDRESS	909 Mar Walt Drive, Ste 1014
CITY ST ZIP		3.4 CITY ST ZIP	Ft Walton Beach, FL 32547
TITLE		4.1 TITLE	D ☐ Change ☒ Addition
NAME		4.2 NAME	Richard R. Baker
STREET ADDRESS		4.3 STREET ADDRESS	31 W. Garden Street, Suite 101
CITY ST ZIP		4.4 CITY ST ZIP	Pensacola, FL 32501
TITLE		5.1 TITLE	D ☐ Change ☒ Addition
NAME		5.2 NAME	Cynthia B. Colton
STREET ADDRESS		5.3 STREET ADDRESS	31 W. Garden Street, Suite 101
CITY ST ZIP		5.4 CITY ST ZIP	Pensacola, FL 32501
TITLE		6.1 TITLE	D ☐ Change ☒ Addition
NAME		6.2 NAME	Garrett W. Walton
STREET ADDRESS		6.3 STREET ADDRESS	31 W. Garden Street, Suite 101
CITY ST ZIP		6.4 CITY ST ZIP	Pensacola, FL 32501

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: Garrett W. Walton, Director 4/10/95

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0380330 CP