

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

APPROVED AND FILED

95 MAR -7 PM 3:23

SECRETARY OF STATE TALLAHASSEE, FLORIDA

1995

DOCUMENT # P94000046129 (0)

ROSA MARIE, INC.

41 COMMERCE ST
APALACHICOLA FL 32320

PO BOX 863
APALACHICOLA FL 32329

21	41 Commerce ST	26	POB 863	4.	06/13/1994	3a.	NONE
22		27	Apalachicola	4.	59-2258865		
23	Apalachicola FL	28	Apalachicola FL	5.			\$8.75 Additional Fee Required
24	32329	29	32329	6.			\$5.00 May Be Added to Fees
25	USA	30	USA	8.			Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
HEVIER, JAN J 41 COMMERCE ST APALACHICOLA FL 32320		81	Name
		82	Street Address (P.O. Box Number is Not Acceptable)
		83	
		84	City
		85	Zip Code

11. I, the agent for the purpose of this filing, have read the Florida Statutes, the other named corporation submits this statement for the purpose of changing its registered office and registered agent, and I, the undersigned, who have been authorized by the corporation's board of directors, hereby accept the appointment as registered agent. I am hereby accepting responsibility for information under § 140.024, Florida Statutes.

12. OFFICERS AND DIRECTORS

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1401	DP THOMPSON, SAMMY PO BOX 863 APALACHICOLA FL 32329	1401	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1402	DST THOMPSON, BEVERLY PO BOX 863 APALACHICOLA FL 32329	1402	Bluff Rd Apalachicola Fla 32320 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1403		1403	Bluff Rd Apalachicola, FL 32320 <input type="checkbox"/> Change <input type="checkbox"/> Addition
1404		1404	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1405		1405	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1406		1406	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1407		1407	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1408		1408	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1409		1409	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1410		1410	<input type="checkbox"/> Change <input type="checkbox"/> Addition

14. I, the undersigned, hereby accept with the filing, voluntarily, irrevocably, and alone, and qualify for the description stated in Section 140.024, Florida Statutes. I further certify that the information contained in this report is true and accurate and that my signature shall have the same legal effect as if made under oath. I understand that the filing of this report is subject to the provisions of the law regarding the filing of this report as set forth in Chapter 607, Florida Statutes, and that my name appears on the list of officers and directors of the corporation.

SIGNATURE: Beverly Thompson 2/20/95 904-653-8042