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 # **P94000061484 (9)**

1. Corporation Name

MOORE & DAUTHTERS, INC.

Principal Place of Business

MOORE & DAUGHTERS, INC.
1025 E 24TH PLAZA
PANAMA CITY FL 32405
US

Mailing Address

2327 W. ORLANDO ROAD
PANAMA CITY FL 32405
US

2. Principal Place of Business

21 1026 E. 24th PLAZA

Suite, Apt. #, etc.

22

City & State

23 PANAMA City Fl.

Zip 24 32405 Country 25 BAY

2a. Mailing Address

26 SAME

Suite, Apt. #, etc.

27

City & State

28

Zip 29 Country 30

3. Date Incorporated or Qualified: 08/17/1994

3a. Date of Last Report: 05/01/1995

4. FEI Number: 59-3262829 — 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

MOORE, LEONARD
2327 WEST ORLANDO RD
PANAMA CITY FL 32405

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 607.0505, Florida Statutes, the above named corporation files 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 duties and obligations of Section 607.0505, Florida Statutes.

SIGNATURE: Leonard Moore - PRES. LEONARD MOORE 4-6-96
Registered Agent Signature — Print Name — Date

12. OFFICERS AND DIRECTORS

TITLE	P	☐ DELETE
NAME	MOORE, LEONARD B	
STREET ADDRESS	2327 W. ORLANDO RD	
CITY-ST-ZIP	PANAMA CITY FL 32405	
TITLE	VP	☐ DELETE
NAME	MOORE, AGNES M	
STREET ADDRESS	2327 W. ORLANDO RD	
CITY-ST-ZIP	PANAMA CITY FL	
TITLE	S	☐ DELETE
NAME	NICHOLSON, KELLEY E	
STREET ADDRESS	2816 PANAMA AVE., APT A	
CITY-ST-ZIP	PANAMA CITY FL 32405	
TITLE	T	☐ DELETE
NAME	PERCY, SUSAN M	
STREET ADDRESS	1303 DELAWARE AVE.	
CITY-ST-ZIP	LYNN HAVEN FL 32444	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
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		

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14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemptions stated in Section 119.07(3)(i), 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 is added in an attachment with an arrow.

SIGNATURE: Leonard Moore / LEONARD MOORE 4-6-96 904-763-6489
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #