

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

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Apr 16 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P94000061484 (9) 1. Corporation Name MOORE & DAUGHTERS, INC.			
Principal Place of Business 1026 E 24TH PLAZA 1025 E 24TH PLAZA PANAMA CITY FL 32405 US		Mailing Address 1026 E 24TH PLAZA PANAMA CITY FL 32405-5211 US	
2. Principal Place of Business 21 Suite, Apt. #, etc. 1026 E 24TH PLAZA 22 City & State PANAMA CITY FL 23 Zip 32405 25 Country BAH		26 Mailing Address 27 Suite, Apt. #, etc. 2327 W. ORLANDO RD. 28 City & State PANAMA CITY FL 32405 29 Zip 32405 30 Country BAH	
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 61 Name 62 Street Address (P.O. Box Number is Not Acceptable) 63 64 City FL 65 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 Signature typed or printed (name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating) 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			



3. Date Incorporated or Qualified 08/17/1994	3a. Date of Last Report 04/09/1996
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	
10. Name and Address of New Registered Agent	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption 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 on an attachment with an address.

SIGNATURE: *Leonard Moore* **LEONARD MOORE** 4-14-97-904-763-6489

CP2E034 (9/96)