

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

APPROVED
AND
Amended
FILED
1996 OCT 23 PM 4:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 794-68348

1. Corporation Name

Master's Corp. of Tallahassee
4933 Moore Pond Rd.
Tallahassee, FL. 32303

Principal Place of Business

Mailing Address

Seminole Valley Golf
851 N. Main St.
Chattahoochee, FL.

3. Date Incorporated or Qualified

9-16-94

3a. Date of Last Report

7-96

2. Principal Place of Business

21 Seminole Valley Golf

2a. Mailing Address

26 4933 Moore Pond Rd

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 851 N. Main St.

27

City & State

City & State

23 Chattahoochee, FL.

28 TALLAHASSEE, FL.

Zip Country

Zip Country

24 32303

29 32303

30 Leon

4. FEI Number

59-3267595

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

Gayla D. Carpenter
2924 N. Settler's Blvd.
TALL, FL. 32303

81 Name Dennis Carpenter

82 Street Address (P.O. Box Number is Not Acceptable)
4933 Moore Pond Rd.

83

84 City TALLAHASSEE

FL

85 Zip Code 32303

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

Dennis J. Carpenter, President

DATE

Aug 1, 96

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE President
NAME Danny R. Carpenter
STREET ADDRESS 2924 N. Settler's Blvd.
CITY-ST-ZIP TALL, FL. 32303

TITLE Treasurer
NAME Gayla D. Carpenter
STREET ADDRESS 2924 N. Settler's Blvd.
CITY-ST-ZIP TALL, FL. 32303

TITLE
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CITY-ST-ZIP

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CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY-ST-ZIP

President
Dennis J. Carpenter
4933 Moore Pond Rd.
TALL, FL. 32303

21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY-ST-ZIP

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*****61.25 *****61.25

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY-ST-ZIP

☐ Change ☐ Addition

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP

☐ Change ☐ Addition

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP

☐ Change ☐ Addition

61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY-ST-ZIP

☐ Change ☐ Addition

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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address

SIGNATURE:

Dennis J. Carpenter

DATE

Aug 1, 96

562-2221

CR2E034 (3/96)