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 # P 94000078922 (9)

1. Corporation Name
Fontaine and Associates, Inc.

Principal Place of Business	Mailing Address
3853 Indian Trail Destin, FL. 32541	3853 Indian Trail Destin, FL. 32541

3. Date Incorporated or Qualified: 10/25/94
3a. Date of Last Report: 4/95

2. Principal Place of Business	2a. Mailing Address
21 535 South Shore Dr.	26 535 South Shore Dr.
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 City & State: Destin, FL.	28 City & State: Destin, FL.
24 Zip: 32541 / 25 Country: Walton	29 Zip: 32541 / 30 Country: Walton

4. FEI Number: 59-3283959 ☐ 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

Rusti Fontaine
3853 Indian Trail
Destin, FL. 32541

10. Name and Address of New Registered Agent

81 Name: Rusti Battle
82 Street Address (P.O. Box Number is Not Acceptable): 710 Legion Dr. Apt. N1
83
84 City: Destin FL 85 Zip Code: 32541

11. Pursuant to the provisions of Sections 607.0502 and 607.1503, 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: Rusti Battle — Rusti Battle — 4/25/96
Signature of Registered Agent — Typed or Printed Name of Registered Agent — DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	P/S	☐ DELETE	1.1 TITLE	P/S	☑ Change ☐ Addition
NAME	Rusti Fontaine		1.2 NAME	Rusti Battle	
STREET ADDRESS	3853 Indian Trail		1.3 STREET ADDRESS	710 Legion Dr. Apt. N1	
CITY-ST-ZIP	Destin, FL. 32541		1.4 CITY-ST-ZIP	Destin, FL. 32541	
TITLE	VP/T	☐ DELETE	2.1 TITLE	VP/T	☑ Change ☐ Addition
NAME	George Fontaine		2.2 NAME	George Fontaine	
STREET ADDRESS	3853 Indian Trail		2.3 STREET ADDRESS	535 South Shore Dr.	
CITY-ST-ZIP	Destin, FL. 32541		2.4 CITY-ST-ZIP	Destin, FL. 32541	
TITLE		☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4 CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE	100001808191	☐ Change ☐ Addition
NAME			4.2 NAME	-05/06/96--01015--001	
STREET ADDRESS			4.3 STREET ADDRESS	***208.75	
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME	5/1/96	
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

CR2E034 (12/95)

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)(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: [signature] George Fontaine 4/25/96 904-654-3112
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #