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

FILED
Aug 08 1996 8:00 am
Secretary of State

DOCUMENT # P94000087731

1. Corporation Name

FARM DEPOT OF WELLINGTON, INC.

Principal Place of Business | Mailing Address

3. Date Incorporated or Qualified: 12/2/94
3a. Date of Last Report: 11/2/95

2. Principal Place of Business
21 2773 State Rd. #7
22 Suite Apt. # etc
23 City & State: West Palm Beach, FL
24 Zip: 33414
25 Country: USA

2a. Mailing Address
26 222 Lakeview Ave.
27 Suite Apt. #, etc: Suite 160-293
28 City & State: West Palm Beach, FL
29 Zip: 33401
30 Country: USA

4. FEI Number: 65-0537881 [ ] Applied For [ ] Not Applicable

5. Certificate of Status Desired [X] **$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 [X] No

9. Name and Address of Current Registered Agent

Keith A. James
777 S. Flagler Dr.
Suite 310-East
West Palm Beach, FL 33401

10. Name and Address of New Registered Agent

81 Name: Kathy A. Metzger, Esq.
82 Street Address (P.O. Box Number is Not Acceptable): Kohl, Metzger, Spotts
83 50 S.E. Kindred Street
84 City: Stuart FL 85 Zip Code: 34994

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: Keith A. James 8/4/96
Signature of Current Registered Agent Signature required only when name is changed | Date

12. OFFICERS AND DIRECTORS

TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D/P Campbell, Sharon 3043 Balearic Dr. Marietta, GA 30067	[ ] DELETE
		[ ] DELETE
		[ ] DELETE
		[ ] DELETE
		[ ] DELETE
		[ ] DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY ST ZIP	P Steven Braswell, Sr. 2773 State Rd. #7 West Palm Beach, FL 33414	[XX] Change [ ] Addition
2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY ST ZIP	V/S/T Tracie Byrd 1164 Cool Springs Dr. Kennesaw, GA 30305	[XX] Change [ ] Addition
3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY ST ZIP		[ ] Change [ ] Addition
4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY ST ZIP		[ ] Change [ ] Addition
5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY ST ZIP		[ ] Change [ ] Addition
6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY ST ZIP	700001917627 -08/09/96--01027--024 ***233.75	[ ] Change [ ] Addition

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

SIGNATURE: Tracie Byrd 8/6/96 (404)262-7411
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Telephone Number

NS 8/8/96