

**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 P/F IN STATE: \$375.)**

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # P95000046302 (2)

1. Corporation Name
BARTON RACINE INTERNATIONAL, INC.



Principal Place of Business: 2561 BOTTOMRIDGE DR. ORANGE PARK FL 32065
Mailing Address: 2561 BOTTOMRIDGE DR. ORANGE PARK FL 32065

INCORPORATED JUNE 9, 1995

3. Date Incorporated or Qualified: 06/09/1995
3a. Date of Last Report: NOT FILED BEFORE
4. FEI Number: 59-3377540
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing: \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

2. Principal Place of Business: 21, 22, 23, 24
2a. Mailing Address: 26, 27, 28, 29, 30

9. Name and Address of Current Registered Agent
**ROSIER, PHYLLIS M
100 W. CALL ST.
STARKE FL 32091**

10. Name and Address of New Registered Agent
81 Name: DONALD E. NEIGHBORS
82 Street Address (P.O. Box Number is Not Acceptable): 2561 BOTTOMRIDGE DRIVE
83
84 City: ORANGE PARK, FL 85 Zip Code: 32065

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: *Donald E. Neighbors*, DONALD E. NEIGHBORS, JULY 3, 1996

| 12. OFFICERS AND DIRECTORS | | DELETE |
|----------------------------|----------------------|--------------------------|
| TITLE | D | <input type="checkbox"/> |
| NAME | NEIGHBORS, DONALD E | |
| STREET ADDRESS | 2561 BOTTOMRIDGE DR. | |
| CITY - ST - ZIP | ORANGE PARK FL 32065 | |
| TITLE | D | <input type="checkbox"/> |
| NAME | NEIGHBORS, JANET M | |
| STREET ADDRESS | 2561 BOTTOMRIDGE DR. | |
| CITY - ST - ZIP | ORANGE PARK FL 32065 | |
| TITLE | | <input type="checkbox"/> |
| NAME | | |
| STREET ADDRESS | | |
| CITY - ST - ZIP | | |
| TITLE | | <input type="checkbox"/> |
| NAME | | |
| STREET ADDRESS | | |
| CITY - ST - ZIP | | |
| TITLE | | <input type="checkbox"/> |
| NAME | | |
| STREET ADDRESS | | |
| CITY - ST - ZIP | | |

| 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | | Change | Addition |
|---|--|--------------------------|--------------------------|
| 11 TITLE | | <input type="checkbox"/> | <input type="checkbox"/> |
| 12 NAME | | | |
| 13 STREET ADDRESS | | | |
| 14 CITY - ST - ZIP | | | |
| 21 TITLE | | <input type="checkbox"/> | <input type="checkbox"/> |
| 22 NAME | | | |
| 23 STREET ADDRESS | | | |
| 24 CITY - ST - ZIP | | | |
| 31 TITLE | | <input type="checkbox"/> | <input type="checkbox"/> |
| 32 NAME | | | |
| 33 STREET ADDRESS | | | |
| 34 CITY - ST - ZIP | | | |
| 41 TITLE | | <input type="checkbox"/> | <input type="checkbox"/> |
| 42 NAME | | | |
| 43 STREET ADDRESS | | | |
| 44 CITY - ST - ZIP | | | |
| 51 TITLE | | <input type="checkbox"/> | <input type="checkbox"/> |
| 52 NAME | | | |
| 53 STREET ADDRESS | | | |
| 54 CITY - ST - ZIP | | | |
| 61 TITLE | | <input type="checkbox"/> | <input type="checkbox"/> |
| 62 NAME | | | |
| 63 STREET ADDRESS | | | |
| 64 CITY - ST - ZIP | | | |

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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 the 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: *Donald E. Neighbors* (DONALD E. NEIGHBORS) JUNE 7, 1996 (904) 272-2315
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (3/96)