

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mordham
Secretary of State
OFFICE OF CORPORATIONS

1996 3-20-96 B-2490

DOCUMENT # P95000054427 (6)

1. Corporation Name
ALLISON DEVELOPMENT INC.



Principal Place of Business: 10611 SALTZMAN TERRACE JACKSONVILLE FL 32225
Mailing Address: 10611 SALTZMAN TERRACE JACKSONVILLE FL 32225

3. Date Incorporated or Qualified: 07/10/1995
3a. Date of Last Report
4. FEI Number: 59-3323697 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

2. Principal Place of Business: 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country 25
2a. Mailing Address: 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country 30

9. Name and Address of Current Registered Agent

ALLISON, VIRGIL L
10611 SALTZMAN TERRACE
JACKSONVILLE FL 32225

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1506, 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

By _____, President, Secretary, Treasurer, or Agent

Title _____

Date _____

| 12. OFFICERS AND DIRECTORS | |
|--|--|
| TITLE: D | <input checked="" type="checkbox"/> DELETE |
| NAME: ALLISON, VIRGIL L | |
| STREET ADDRESS: 10611 SALTZMAN TERRACE | |
| CITY-STATE-ZIP: JACKSONVILLE FL 32225 | |
| TITLE: D | <input type="checkbox"/> DELETE |
| NAME: ALLISON, DOROTHY E | |
| STREET ADDRESS: 10611 SALTZMAN TERRACE | |
| CITY-STATE-ZIP: JACKSONVILLE FL 32225 | |
| TITLE: | <input type="checkbox"/> DELETE |
| NAME: | |
| STREET ADDRESS: | |
| CITY-STATE-ZIP: | |
| TITLE: | <input type="checkbox"/> DELETE |
| NAME: | |
| STREET ADDRESS: | |
| CITY-STATE-ZIP: | |
| TITLE: | <input type="checkbox"/> DELETE |
| NAME: | |
| STREET ADDRESS: | |
| CITY-STATE-ZIP: | |

| 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
|---|---|
| 1. TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 1.2 NAME | |
| 1.3 STREET ADDRESS | |
| 1.4 CITY-STATE-ZIP | |
| 2. TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 2.2 NAME | |
| 2.3 STREET ADDRESS | |
| 2.4 CITY-STATE-ZIP | |
| 3. TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 3.2 NAME | |
| 3.3 STREET ADDRESS | |
| 3.4 CITY-STATE-ZIP | |
| 4. TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 4.2 NAME | |
| 4.3 STREET ADDRESS | |
| 4.4 CITY-STATE-ZIP | |
| 5. TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 5.2 NAME | |
| 5.3 STREET ADDRESS | |
| 5.4 CITY-STATE-ZIP | |
| 6. TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 6.2 NAME | |
| 6.3 STREET ADDRESS | |
| 6.4 CITY-STATE-ZIP | |

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption statement 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, on an attachment with an address.

SIGNATURE: X
SIGNATURE AND TITLE OF REGISTERED AGENT: *Dorothy E Allison*

3-15-96
Date: 904-642-1088
Telephone No.

CR2E034 (12/95)