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CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

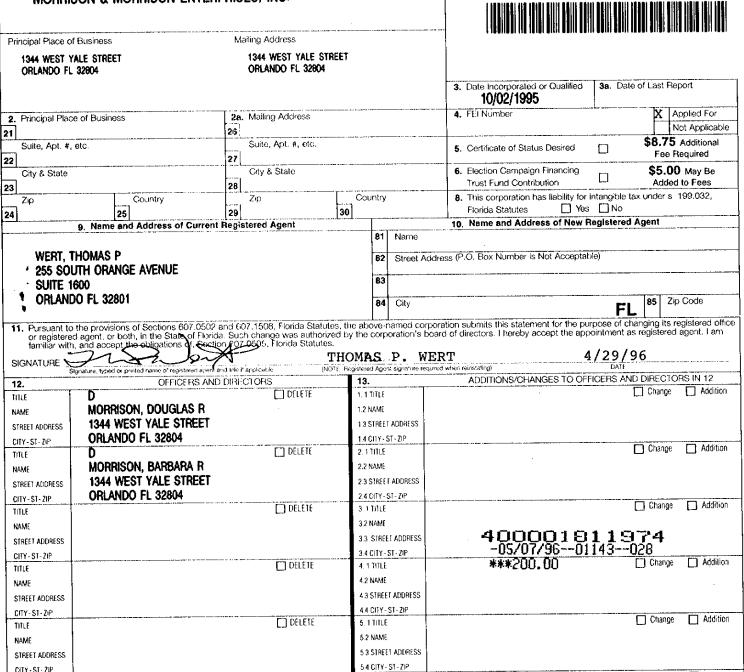
DIVISION OF CORPORATIONS

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DOCUMENT #

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MORRISON & MORRISON ENTERPRISES, INC.



14. I do hereby certify that the information supplied with this filing is voluntarily turnished 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 logal effect as if hade under oath; that I am an officer or director of the corporation or the receiver or trustee enipowered 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.

6.1 TIBLE

6.2 NAME

DELETE

E OF SIGNING OFFICER OR DIRECTOR

CITY - ST - ZIP

STREET ADDRESS

TITLE

NAME

BARBARA R. MORRISON

6.3 STREET ADDRESS

6 4 CITY - ST - ZIP

4/29/96

☐ Change

☐ Addition

(12/95)CR2E034