

**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 REINSTATE: \$375.)**

PROFIT CORPORATION  
 ANNUAL REPORT  
 1996



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

DOCUMENT # P95000078752 (9)

1. Corporation Name

PAISLEY'S A1A, INC.



Principal Place of Business

Mailing Address

208 A1A  
 FLAGLER BEACH FL

208 A1A  
 FLAGLER BEACH FL

3. Date Incorporated or Qualified  
 10/02/1995

3a. Date of Last Report  
 N/A: Initial Report

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt #, etc

26 P.O. Box 280

22 City & State

27 City & State  
 FLAGLER BEACH, FL

24 Zip Country

29 32136 30 FLAGLER

4. FEI Number

59-3339911

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

10. Name and Address of New Registered Agent

CORPORATION SERVICE COMPANY  
 1201 HAYS STREET  
 TALLAHASSEE FL 32301-2525

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 607.1508, 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

Signature typed out in full in all registered agent and Director fields

(Both Registered Agent Signature required when both change)

(Date)

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE  DELETE  
 NAME ~~LEONARD J. FRIES~~  
 STREET ADDRESS ~~2584 OSPRAY CIRCLE~~  
 CITY-ST-ZIP ~~FLAGLER BEACH, FL 32136~~

1.1 TITLE  Change  Addition  
 1.2 NAME P, D LEONARD J. FRIES  
 1.3 STREET ADDRESS 2584 OSPRAY CIRCLE  
 1.4 CITY-ST-ZIP FLAGLER BEACH, FL 32136

TITLE  DELETE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

2.1 TITLE  Change  Addition  
 2.2 NAME V, D MARGARET M. FRIES  
 2.3 STREET ADDRESS 2584 OSPRAY CIRCLE  
 2.4 CITY-ST-ZIP FLAGLER BEACH, FL 32136

TITLE  DELETE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

3.1 TITLE  Change  Addition  
 3.2 NAME S, D LORRAINE VERITY  
 3.3 STREET ADDRESS 13 LAUREL ROAD  
 3.4 CITY-ST-ZIP LINDENHURST, NY 11757

TITLE  DELETE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

4.1 TITLE  Change  Addition  
 4.2 NAME T, D JAMES L. MANFRE  
 4.3 STREET ADDRESS 84 WASHINGTON ST.  
 4.4 CITY-ST-ZIP BABYLON, NY 11702

TITLE  DELETE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

5.1 TITLE  Change  Addition  
 5.2 NAME  
 5.3 STREET ADDRESS  
 5.4 CITY-ST-ZIP

TITLE  DELETE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

6.1 TITLE  Change  Addition  
 6.2 NAME  
 6.3 STREET ADDRESS  
 6.4 CITY-ST-ZIP

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

SIGNATURE:

Margaret M. Fries

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MARGARET M. FRIES

6-7-96

Date

904 439-4530

Telephone #

CR2E034 (3/96)