

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

DOCUMENT # P95000086656 (2)

1. Corporation Name

SURPLUS MERCHANDISING CENTERS, INC.



Principal Place of Business

2164 15TH CIR. N.
ST. PETERSBURG FL 33713

Mailing Address

2164 15TH CIR. N.
ST. PETERSBURG FL 33713

3. Date Incorporated or Qualified

11/06/1995

3a. Date of Last Report

2. Principal Place of Business

21 4124 PARK BOULEVARD

2a. Mailing Address

26

4. FEI Number

59-3342207

Applied For

Not Applicable

Suite, Apt. #, etc

Suite, Apt. #, etc.

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

City & State

City & State

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

23 PINEHILLS PARK, FL

28

Zip

Country

Zip

Country

24 34665

25

USA

29

30

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

OLSON, STEWART O
BARNETT TOWER, STE. 1210
ONE PROGRESS PLAZA
ST. PETERSBURG FL 33701

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 or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE DP ☐ DELETE
NAME CARRELL, RICHARD M
STREET ADDRESS 2164 15TH CIR. N.
CITY - ST - ZIP ST. PETERSBURG FL 33713

1.1 TITLE ☒ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS 1315 GLENVIEW LANE
1.4 CITY - ST - ZIP LAKE LAND, FL 33813-1803

TITLE D ☐ DELETE
NAME CARRELL, JUDY
STREET ADDRESS 2164 15TH CIR. N.
CITY - ST - ZIP ST. PETERSBURG FL 33713

2.1 TITLE ☒ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS 1315 GLENVIEW LANE
2.4 CITY - ST - ZIP LAKE LAND, FL 33813-1803

TITLE DV ☐ DELETE
NAME DEPUUGH, YVONNE
STREET ADDRESS 125-C TRADE ST.
CITY - ST - ZIP LEXINGTON KY 40510

3.1 TITLE ☒ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS 2164 - 15 CIRCLE NORTH
3.4 CITY - ST - ZIP ST. PETERSBURG, FL 33713

TITLE DST ☐ DELETE
NAME DEPUUGH, ROBERT V
STREET ADDRESS 125-C TRADE ST.
CITY - ST - ZIP LEXINGTON KY 40510

4.1 TITLE ☒ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS 2164 - 15 CIRCLE NORTH
4.4 CITY - ST - ZIP ST. PETERSBURG, FL 33713

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

SIGNATURE:

Yvonne DePugh, V.P.

4-18-96

913-544-1895

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (12/95)