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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **P96000014834 (1)**

BARNES SERVICE COMPANY, INC.

Mailing Address Page tral Place of Business 2738 HENDRICKS AVE. 2738 HENDRICKS AVE. JACKSONVILLE FL 32207-4106 JACKSONVILLE FL 32207 3. Date Incorporated or Qualified 3a. Date of Last Report 02/16/1996 2a. Mailing Address 2. Prescipal Place of Basicess Applied For Not Applicable 26 Suite Apt # etc Suite, Apl. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be П 23 28 Trust Fund Contribution Added to Fees Country $Z_{\rm IO}$ 8. This corporation has liability for intangible tax under s. 199.032 Yes No 29 30 Florida Statutes 24 25 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name BARNES, JOYCE W 2738 HENDRICKS AVE. Street Address (P.O. Box Number is Not Acceptable) **JACKSONVILLE FL 32207** 83 84 City 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 of 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. Lam familiar with land accept the obligations of Section 607.0505, Florida Statutes. SIGNATURE ба рот не туро а ог стовен пачесов терезоос парем не ство об на расавла-(NOTE: Registered Agent signature required when reinstaling) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. 12. DELETE Change PHE Ď 1.1 TITLE BARNES, JOYCE W 1.2 NAME NAME 2738 HENDRICKS AVE. 1.3 STREET ADDRESS STEEL ACTION IN JACKSONVILLE FL 32207 1.4 CITY-ST-Z-P Addition DELETE Change THE 2.1 TITLE 2.2 NAME N2.54 2.3 STREET ADDRESS \$18511 400H 11 2 4 CITY - ST-ZIP OHY 51 76 Addition DELETE Change 3.1 THILE 311.E 3.2 NAME NAME 3.3 STREET ADDRESS STREET ALTORISM ODY 51-73 3.4 CITY - \$1 - ZIP DELETE Change Addition 1 ILE 4.1 TITLE 4. 2 NAME 44.4 4.3 STREET ADDRESS STEP FIREL REST 4.4 CITY - ST - Z:P City-Si 1016 DELETE 5.1 TiTLE Change Addition 5.2 NAME ANV STREET ADDRESS 5.3 STREET ADDRESS 54 CITY-ST-ZIP 00 V - 51 75P DELETE Change Addition T. F 61 TITLE NAME 62 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP 14. Tab hereby peribly that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or suppliemental 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 other or present of the corporation or the receiver or trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Book 13 a charged, or on any formant with an address.

SIGNATURE:

STATE LATORESS

FILED

Feb 20 1997 8:00am

Secretary of State

(96/6)**CR2E034**