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1997 APR 29 PM 3:36

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P96000078693 (4)

1. Corporation Name

ROSE AND THORN, INC.

Principal Place of Business

Mailing Address

6041 REDFIELD CIRCLE
TALLAHASSEE FL 32311

6041 REDFIELD CIRCLE
TALLAHASSEE FL 32311-8568

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

3. Date Incorporated or Qualified

3a. Date of Last Report

09/23/1996

4. FEI Number

Applied For

59-3401036

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

DONELAN, STEPHEN M
2555 SHUMARD OAK BLVD.
TALLAHASSEE FL 32309-2100

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 re/instating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN '12

TITLE PRESIDENT ☐ DELETE
NAME CHARLES L. JOHNSON
STREET ADDRESS 6041 REDFIELD CR.
CITY-ST-ZIP TALLAHASSEE, FL 32311

1.1 TITLE PRESIDENT ☐ Change ☐ Addition
1.2 NAME CHARLES L. JOHNSON
1.3 STREET ADDRESS 6041 REDFIELD CR.
1.4 CITY-ST-ZIP TALLAHASSEE, FL 32311

TITLE VICE PRESIDENT ☐ DELETE
NAME YVONNE OWENS-JOHNSON
STREET ADDRESS 6041 REDFIELD CR.
CITY-ST-ZIP TALLAHASSEE, FL 32311

2.1 TITLE VICE PRESIDENT, SECRETARY ☐ Change ☐ Addition
2.2 NAME YVONNE OWENS-JOHNSON
2.3 STREET ADDRESS 6041 REDFIELD CR.
2.4 CITY-ST-ZIP TALLAHASSEE, FL 32311

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

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 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 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 or on an attachment with an address.

SIGNATURE:

CHARLES L. JOHNSON
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-29-97

Date

487-2315

Daytime Phone #

0049783

CR2E034 (9/96)