FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # P96000092024 (4)

THE TOY & CLARK COMPANY

Principal Place of Business

Mailing Address

FILED May 02 1997 8:00am Secretary of State



5 SEASHORE DR PENSACOLA FL 32561		5 SEASHORE DR PENSACOLA FL 32561-2428						
					3. Date Incorporated or Qualified 11/05/1996	3a. Da	te of Last I	Report
2. Principal Place of L	Business	2a. Mailing Address			4. FEI Number		IA	pplied For
1 4251 CRI	WFORD DR	26 4/25/CR.	AUFURO D	K	59-34/1266			lot Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired			Additional tegulred
City & State 23 PENSACOLA FL		City & State 28 PENSACON FL Zip			Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees	
3 2 504	Country	Zip	Country		8. This corporation has liability for i	intangible	tax under	s. 199,032,
4 32504	25 E SC		30 /30			Yes		
	anie and Address of Corre	nt Registered Agent	81 Nam		10. Name and Address of New Re	gistered /	Agent	
	IARLES L JR.		81 Nam	e				
4251 CRAY			82 Stree	t Addre	ss (P.O. Box Number is Not Acceptab	le)	··········	· · · · · · · · · · · · · · · · · · ·
PENSACOL	A FL 32004		83					
			1					
			84 City			FL	85 Zip	Code
agent Lam famili. SIGNATURE	ar with, and accept the obliq	gations of, Section 607.0505, F	lorida Statutes.		on's board of directors. I hereby accep		on gritorit d	a registated
	typed or printed name of registered at	gent and trie II applicable (NO ND DIRECTORS	TE: Registered Agent signal	ne redrited	d when reinstaling) ADDITIONS/CHANGES TO OFFICE	DATE.	DIRECTO	DC IN 12
12.	OFFICENS AF	DELETE	13. 1.1 TIYLE		ADDITIONS/CHANGES TO OFFIC	END AND	Change	Addition
j -	ALLEN		1.2 NAME	ł				
	ASHORE DR		1.3 STREET ADDRESS	,				
	ACOLA FL 32561		1.4 CITY-ST · ZIP					
THIE D		DELETE	2.1 TITLE	 			Change	Addition
NAME CLAF	IK, CHARLES L JR.		2.2 NAME					
SHEEL LADORESS 4251	CRAWFORD DR		2.3 STREET ADDRESS	3	N.	. 1		
CITY-\$1-29 PENS	SACOLA FL 32504		2.4 CITY-ST-ZIP	<u> </u>	`	1		
DICT		DELETE	3.1 TITLE				Change	Addition Addition
NAME			3.2 NAME	1				
STREET ADDRESS			3.3 STREET ADDRESS	3				
C(F) - S1 - 7(P)	A	- December 1	3.4. CITY - ST - ZIP	_ 	·······		T 1 2	
THILE		DELETE	4.1 TITLE]			Change	Addition
NAME			4 2 NAME					
STREET AT IDRESS			4.3 STREET ADDRESS	3				
0HY-51-749 3HE		DELETE	4.4 CITY - ST - ZIP 5.1 TITLE				Change	Addition
ſ		T precie					Change	F"] VOOLGO
NAME CITAL CALIBOTES			5.2 NAME	.				
STEFF CALABLES			5.3 STREET ADDRESS	'				
ERY-SU 20°		DELETE	5 4 CITY - ST - ZIP 6 1 TITLE	+			Change	Addition
NAME		hand when the	6.2 NAME	1				Band Floor Hol
STREET ADDRESS			6.3 STREET ADDRESS	,		•		
City St-7iF			6.4 CITY - \$1 - ZIP					
	that the information cumpli	ord with this filing door at our		L	in Section 119.07(3)(i), Florida Statute	o I further	tile - the e	4 Ab -

information endicated on this annual report or supplemental annual eport 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 of the 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 a transfer of the corporation of the receiver of the empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name

SIGNATURE

NATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

25 April 97 904-444-9303

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