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

PROFIT CORPORATION ANNUAL REPORT

1997

CITY-ST-ZIP

STREET ADDRESS

TITLE

NAME



FLORIDA DEPARTMENT OF STATE

FILED

May 06 1997 8:00am

Secretary of State

Change

Addition

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000092588 (8)

MOREY MOVING & STORAGE, INC.

Principal Place of Business Mailing Address 932 DEER CHASE DRIVE ST. AUGUSTINE FL 32084 932 DEER CHASE DRIVE ST. AUGUSTINE FL 32086-5845 3. Date Incorporated or Qualified 3a. Date of Last Report 11/07/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 9-3293971 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5,00 May Be Election Campaign Financing Added to Fees 23 28 Trust Fund Contribution Zip Country Zιρ Country This corporation has liability for intangible tax under s. 199.032, Yes No 24 25 29 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent **BOLES, JOSEPH L** JR. 120 CHARLOTTE STREET ST. AUGUSTINE FL 32084 11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statutes, the above-named corporation sobmits 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 spred agent, or both, in the State of Florida. Such change was authorized by the corporation's board of direct Addition with and a copt the obligations of Section 607.0505, Florida Statutes. dent quired when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13 Change Addition DELETE 1.1 TILLE (e SIDEN TITLE NAME 1.2 NAME STREET ADDRESS 1.3 STREET ADDRESS 3201 9 CITY-ST-ZIP 1.4 DITY - ST - 7IP DELETE TITLE 2.1 NILE NAME 2.2 NAME koch 2 3 STREET ADDRESS STREET ADDRESS 208 Vadortion 2. 4 CITY - ST - 7IP CITY-ST-ZIP DELETE 3.1 DITLE TITLE NAME 3.2 NAME Drive STREET ADDRESS 3.3.51BEEL ADDRESS CITY-ST-ZIP 3.4. C(1) + \$1 - Z(P) DELETE Addition TITLE 4.1 DILE 4 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - S1 - ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS

Information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal offect as if made under eath; 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 ff changed or on an attachment with an address

5.4 ÇITY - ST - ZIP

G.3 STHEET ADDRESS G.4 CITY-ST-ZIP

6.1 THLE

G.2 NAME

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

DELETE