FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT **CORPORATION** ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

	1996	DIV	ISION OF CORPORAT	TIONS	İ		
DOCUN 1. Corporation	MENT # \$1766	35	(8)				
}	Name HEN, JUDKINS, SIMPSON (R HIGH P.A.	•				
I III O	TEN, CODICINO, CINII CON	A FIIGHTI 1 7/A					BIANA BIKIN ANDAN 1841
Principal Place	of Business	Mailing Addres					
	SEE FL 32303		1102 NORTH GADSDEN ST. TALLAHASSEE FL 32303				
					3. Date Incorporated or Qualified 12/11/1990	3a. Date of Last 04/19/	
2. Principal Place of Business		<u> </u>	2a. Mailing Address		4. FEI Number 59-3040041		Applied For
21 Suite, Apt. #	l etc	Suite, Apt.	# etc			<u> </u>	Not Applicable 5 Additional
22	1000	27			5. Certificate of Status Desired	1 1	Required
City & State		City & State	City & State		6. Election Campaign Financing	_ \$5.0	00 May Be
23		28			Trust Fund Contribution	☐ Add	led to Fees
Zip 24	Country Zip 25 29		Country		8. This corporation has liability for intangible tax under s 199.032, Florida Statutes Yes No		
[24]	9. Name and Address of Current				10. Name and Address of New F		
			В	1 Name			
SIMPSON, LARRY D. 82 Street Andre					ress (P.O. Box Number is Not Acceptate	ole)	
1102 NORTH GADSDEN ST.							
TALLA	HASSEE FL 32303		هر	3			
		•	8	4 City		E1 85 Z	Zip Code
11. Pursuant to	the provisions of Sections 07.0 / 2	and 607.1508, Flori	da Statutes, the adove	named corpor	ration submit this statement for the pur	roose of changing its	registered office
or registere familiar with	ed agent, or both to the State of Phyrid h, and accept the obligations of Section	 a. Such change was on 607.0505. Florida 	s authorized by the co	rporation's boa	ration subnite this statement for the pur rd of directors. I hereby accept the app	ointment ac registere	agent. I am
SIGNATURE _	Jall)	- Correction Francis	a Stotatos.			4/15/9	46
		tie if applicable	(NQ1): Registered Ag	jent signature rerjuire		JATE	
12.	OFFICERS AND	DIRECTORS	13.	<u>, </u>	ADDITIONS/CHANGES TO OFF		
NAME	JUDKINS, JAMES P.	ב, מ	LETE 1 1 TITL			Change	: Addition
STREET ADDRESS	1102 NORTH GADSDEN ST			ET ADDRESS			
CITY-S1-ZIP	TALLAHASSEE FL		1.4 CITY				
TITLE	DST	□ DE				☐ Change	Addition
NAME	SIMPSON, LARRY D.		2 2 NAM	E			
STREET ADDRESS		1102 NORTH GADSDEN ST.		ET ADDRESS			
CITY-ST-ZIP	TALLAHASSEE FL D		24 C(TY			F) (h	
TITLE NAME	KITCHEN, E C DEENO	[] 0	ELETE 3 1 TITL 32 NAM	i		☐ Change	Addition
STREET ADDRESS	1102 N GADSDEN ST			EET ADDRESS			
CITY-ST-ZIP	TALLAHASSEE FL		3.4 CITY				
TITLE	D	☐ DE				Change	Addition
NAME	HIGH, ROBERT K		4.2 NAM	E			
STREET ADDRESS	1102 N GADSDEN ST		4.3 STRE	ET ADDRESS			·
CITY-ST-ZIP	TALLAHASSEE FL	F7.60	4.4 CITY				-
TITUF NAME		[] D [☐ Change	Addition
STREET ADDRESS			5.2 NAM 5.3 STRE	ET ADDRESS			
CHY-ST-ZIP			5.4 CiTY				
18LE		□ D€				☐ Change	Addition
NAME			6.2 NAM	ŧ			
STREET ADDRESS			63 STRE	ET ADDRESS			
CITY-ST-ZIP	12 M A A A	N. (1) 2:	6.4 City	- S1 - ZIP			
certify that oath; that i appears in	r ceruly that the information supplied with the information indicated on this annual am an officer or director of the coro Block 12 or Block 13 if changed with	vitri triis filing is volu al report or Jupiler lation or he receive n an attacker ent wit	ntarily turnished and do iental annual report is t r or trustee empowered h an address.	es not qualify fi irue and accura d to execute thi	or the exemption stated in Section 119 ate and that my signature shall have the is report as required by Chapter 607, Fi	.u7(3)(k), Florida Stati same legal effect as orida Statutes; and t	utes. I further if made under hat my name

SIGNATURE: