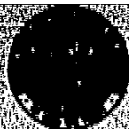


**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF REVENUE
Benjamin R. McWhorter
Secretary of State
DIVISION OF CORPORATIONS

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 APR 11 PM 3:26**

DOCUMENT # S23596

(7)

1. Corporation Name

2071 SOUTH ATLANTIC, INC.

Principal Place of Business

Mailing Address

**2071 S ATLANTIC AVE
DAYTONA BEACH SHORES FL 32118-5007**

**2071 S ATLANTIC AVE
DAYTONA BEACH SHORES FL 32118-5007**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

01/09/1991

3a. Date of Last Report

04/29/1994

4. FEI Number

59-3045637

Applied For

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

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**HAWKINS, DONALD E
501 S RIDGEWOOD AVE
DAYTONA BEACH FL 32114**

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 his if applicable

(NOTE: Registered Agent signature required when reinstating)

(DATE)

12. OFFICERS AND DIRECTORS

TITLE	D
NAME	FOWLER, WILMOTH G
STREET ADDRESS	245 SEAHAWK
CITY - ST - ZIP	DAYTONA BCH FL
TITLE	D
NAME	FOWLER, EVELYN F
STREET ADDRESS	245 SEAHAWK
CITY - ST - ZIP	DAYTONA BCH FL
TITLE	D
NAME	WHITE, O.L
STREET ADDRESS	3555 S ATLANTIC AVE
CITY - ST - ZIP	DAYTONA BCH FL
TITLE	D
NAME	WHITE, MABEL
STREET ADDRESS	3555 S ATLANTIC AVE
CITY - ST - ZIP	DAYTONA BCH FL
TITLE	D
NAME	LUSTIK, GREGORY A
STREET ADDRESS	1991 SPRUCE CREEK CIR N
CITY - ST - ZIP	DAYTONA BCH FL
TITLE	Y
NAME	LUSTIK, JANET
STREET ADDRESS	1991 SPRUCE CREEK CIR. N.
CITY - ST - ZIP	DAYTONA BCH FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 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 is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 if changed, or on an attachment with an address.

SIGNATURE:

WilmOTH G Fowler

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-5-95

Date

2521564

Signature Number