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CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT #

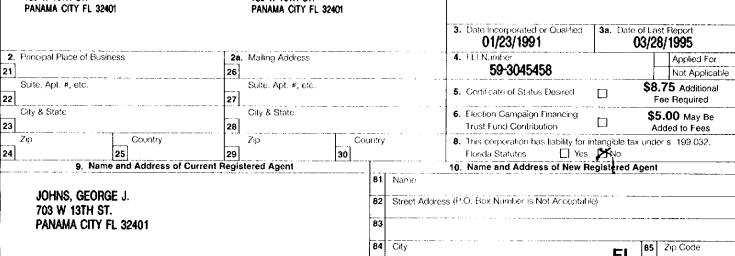
S26951

YELLOW CAB CO. OF PANAMA CITY & PANAMA CITY BEAC

Principal Place of Business 703 W 13TH ST.

Mailing Address

703 W 13TH ST. PANAMA CITY FL 32401



11. Pursuant to the provisions of Sections 607,0502 and 607,1508, Florida Statutes, the above named corporation's the 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. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607,0505, Florida Statutes.

Signal recity and or printed hame of registered agent an illition applicable CVOILE. By a Store J. Admint sopration 12 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DPS DELETE Addition TITLE 1. 1 TITLE Change JOHNS, GEORGE J. NAME 1.2 NAME 703 W 13TH ST. STREET ADDRESS 1.3 STREET ADDRESS PANAMA CITY FL CITY - ST - ZIP 14 CHY-ST-ZIP DVT DELETE TITLE Change Addition 2.1 HILE JOHNS, RUTH M. NAME 2.2 NAME 703 W 13TH ST. STREET ADDRESS 2.3 STREET ADDRESS PANAMA CITY FL CITY-ST-ZIP 24 CITY - \$1 - 74P TITLE DELETE ☐ Change 3 1 TITLE Addition NAME 3.2 NAME

STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 34 CHY-ST-ZIP DELETE 7171 F 4 1 TITLE Change Addition NAME 4.2 NAME STREET AUDRESS 4.3 STREET ADDRESS 011Y-S1-ZIP 4.4 CITY - ST-ZIP DELETE THE 5 1 TOLE Change Addition NAME S 2 NAME STREET ADDRESS 5.3 STREET ADDRESS

CITY-S1-ZIP 5.4 CHY - \$1 - 7IP □ DELETE TILLE 6 ! TITLE Change Addition. NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

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 13 if changed, or on an attachment with an address.

6.4 CiTY-St- Z-P

SIGNATURE:

CITY - ST - ZIP

904-763-0211

(12/95)

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