

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.  
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # S27177 (2)

1. Corporation Name

THE HORNSBY COMPANY



Principal Place of Business

Mailing Address

3371 ADDISON DRIVE  
PENSACOLA FL 32514  
US

3371 ADDISON DRIVE  
PENSACOLA FL 32514  
US

3. Date Incorporated or Qualified  
01/24/1991

3a. Date of Last Report  
04/28/1995

2. Principal Place of Business

2a. Mailing Address

21 605 E. GOVERNMENT STREET

26 605 E. GOVERNMENT STREET

4. FEI Number  
59-3076318

Applied For  
Not Applicable

Suite, Apt. #, etc

Suite, Apt. #, etc

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

22 City & State  
PENSACOLA, FLORIDA

27 City & State  
PENSACOLA, FLORIDA

6. Election Campaign Financing  
Trust Fund Contribution ☐

\$5.00 May Be  
Added to Fees

23 Zip  
32501

25 Country  
USA

28 Zip  
32501

30 Country  
USA

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

HORNSBY, AUBREY T., JR.  
3371 ADDISON DRIVE  
PENSACOLA FL 32514

81 Name  
HORNSBY, AUBREY T., JR.

82 Street Address (P.O. Box Number is Not Acceptable)  
605 E. GOVERNMENT STREET

83

84 City  
PENSACOLA, FLORIDA FL 85 Zip Code  
32501

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 title, if applicable

(NOTE: Registered Agent Signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
D  
HORNSBY, AUBREY T., JR.  
3956 DUNWOODY DRIVE  
PENSACOLA FL

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ DELETE

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TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ DELETE

11 TITLE  
☐ Change ☐ Addition

12 NAME

13 STREET ADDRESS

14 CITY - ST - ZIP

21 TITLE  
☐ Change ☐ Addition

22 NAME

23 STREET ADDRESS

24 CITY - ST - ZIP

31 TITLE  
☐ Change ☐ Addition

32 NAME

33 STREET ADDRESS

34 CITY - ST - ZIP

41 TITLE  
☐ Change ☐ Addition

42 NAME

43 STREET ADDRESS

44 CITY - ST - ZIP

51 TITLE  
☐ Change ☐ Addition

52 NAME

53 STREET ADDRESS

54 CITY - ST - ZIP

61 TITLE  
☐ Change ☐ Addition

62 NAME

63 STREET ADDRESS

64 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, director, or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes, and that my name appears in Block 12 or Block 13 or changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/6/96 404  
4331460

CR2E034 (3/96)