

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

CORPORATION ANNUAL REPORT 1995	 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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**APPROVED
AND
FILED**

95 MAY 16 AM 8:19

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # S32633 (7)

1. Corporation Name
THE SKINNER COMPANY

Principal Place of Business 8787 SOUTHSIDE BLVD #108 JACKSONVILLE FL 32256	Mailing Address 8787 SOUTHSIDE BLVD #108 JACKSONVILLE FL 32256
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DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 02/18/1991		3a. Date of Last Report 06/06/1994	
4. FEI Number 59-3053078		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. 109.032, Florida Statutes ☐ Yes ☐ No			

2. Principal Place of Business 21 8787 SOUTHSIDE BLVD. Suite, Apt. #, etc. 22 SUITE 3315 City & State 23 JACKSONVILLE, FL Zip 24 32256		2a. Mailing Address 25 P.O. BOX 550977 Suite, Apt. #, etc. 27 City & State 28 JACKSONVILLE, FL Zip 29 32255 Country 30 FL	
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9. Name and Address of Current Registered Agent HOLBROOK, H. LEON, III 2301 INDEPENDENT SQUARE ONE INDEPENDENT DR JACKSONVILLE FL 32202		10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code	
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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 _____ DATE _____
Signature: Typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	☒ Change ☐ Addition
NAME	SKINNER, RANDALL T.	1.2 NAME	
STREET ADDRESS	8787 SOUTHSIDE BLVD #108	1.3 STREET ADDRESS	8787 SOUTHSIDE BLVD. # 3315
CITY - ST - ZIP	JACKSONVILLE FL	1.4 CITY - ST - ZIP	JACKSONVILLE, FL 32256
TITLE	D	2.1 TITLE	☒ Change ☐ Addition
NAME	SKINNER, C. BRIGHTMAN JR	2.2 NAME	
STREET ADDRESS	13047 SANDWEDGE CT.	2.3 STREET ADDRESS	3755 HUNT CLUB RD.
CITY - ST - ZIP	JACKSONVILLE FL 32224	2.4 CITY - ST - ZIP	JACKSONVILLE, FL 32224
TITLE		3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY - ST - ZIP		3.4 CITY - ST - ZIP	
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		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 110.07(2)(A), 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: *Randall T. Skinner* **5/12/95 (904) 464-0611**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR