

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # S88989 (6)

1. Corporation Name

PPF ONE, INC.



Principal Place of Business

Mailing Address

1002 W 23RD ST
SUITE 400
PANAMA CITY FL 32405-3645

1002 W 23RD ST
SUITE 400
PANAMA CITY FL 32405-3645

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

24 Country

28 Zip

29 Country

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

HENRY, ROBERT F. III
1002 W 23RD ST
SUITE 400
PANAMA CITY FL 32405

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 fee if applicable.

(NOTE: Registered Agent signature required when resigning)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE DC
NAME CHAPMAN, JOSEPH F. III
STREET ADDRESS 1002 W 23RD ST., STE 400
CITY- ST- ZIP PANAMA CITY FL

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY- ST- ZIP

TITLE PD
NAME POWELL, RAYMOND E.
STREET ADDRESS 2305 HIGHWAY 77
CITY- ST- ZIP PANAMA CITY FL

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY- ST- ZIP

TITLE VT
NAME HENRY, II, ROBERT F.
STREET ADDRESS 1002 W 23RD ST., STE 400
CITY- ST- ZIP PANAMA CITY FL

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY- ST- ZIP

TITLE VS
NAME CHAPMAN IV, JOSEPH F
STREET ADDRESS 1002 W 23RD ST / STE - 400
CITY- ST- ZIP PANAMA CITY FL

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY- ST- ZIP

TITLE AS
NAME PIPPIN, LAURETTA J
STREET ADDRESS 1002 W 23RD ST., STE 400
CITY- ST- ZIP PANAMA CITY FL

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY- ST- ZIP

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

6.1 TITLE
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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Lauretta J. Pippin, Asst. Sec. 4/25/96 (904)769-8981

Date

Daytime Phone

CR2E034 (12/95)

4/30/96