FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT **1996**

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

DOCUMENT # **V13602** **(0)**

1. Corporation Name

R. W. MEISSNER AND ASSOCIATES, INCORPORATED

Principal Place of Business
406 BISHOP BLVD.
PERRY FL 32347
US

Mailing Address
P.O. BOX 1304
PERRY FL 32347
US

3. Date Incorporated or Qualified: 02/12/1992
3a. Date of Last Report: 03/08/1995
4. FEI Number: 59-3117630 — [ ] 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
21 Route 2, Box 203
Suite, Apt. #, etc.
22 Sandpiper Rd, Cedar Island
City & State
23 Perry FL
Zip 24 32347 Country 25 Taylor

2a. Mailing Address
26
Suite, Apt. #, etc.
City & State
28
Zip 29 Country 30

9. **Name and Address of Current Registered Agent**

MEISSNER, ROBERT W
406 BISHOP BLVD
PERRY FL 32347

10. **Name and Address of New Registered Agent**

81 Name
82 Street Address (P.O. Box Number is Not Acceptable) Route 2, Box 203, Sandpiper Road
83 Cedar Island
84 City Perry FL 85 Zip Code 32347

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 Robert W. Meissner — Robert W. Meissner VP/Sec 3-23-96

12. OFFICERS AND DIRECTORS		
TITLE	PT	[ ] DELETE
NAME	MEISSNER, STELLA P.	
STREET ADDRESS	406 BISHOP BLVD.	
CITY-ST-ZIP	PERRY FL	
TITLE	VPS	[ ] DELETE
NAME	MEISSNER, ROBERT W.	
STREET ADDRESS	406 BISHOP BOVD.	
CITY-ST-ZIP	PERRY FL	
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
1.1 TITLE	PTD	[✓] Change [ ] Addition
1.2 NAME		
1.3 STREET ADDRESS	Route 2, Box 203, Sandpiper Rd, Cedar Island	
1.4 CITY-ST-ZIP		
2.1 TITLE	VPSD	[✓] Change [ ] Addition
2.2 NAME		
2.3 STREET ADDRESS	Route 2, Box 203, Sandpiper Rd, Cedar Island	
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	300001761543 -03/28/96--01087--016 ***200.00	
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		

CR2E034 (12/95)

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: Robert W. Meissner — Robert W. Meissner VP/Sec 3-23-96 904-578-2277

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CS 3/28/96