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

APPROVED AND FILED

95 MAY -1 AM 8:34

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **V16288** **(5)**

1. Corporate Name
ACORN GIFTS INC

Principal Place of Business
RT. 1 BOX 3186
PANACEA FL 32346

Mailing Address
RT. 1 BOX 3186
PANACEA FL 32346
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 02/25/1992
3a. Date of Last Report: 04/12/1994

2. Principal Place of Business
21 48 COASTAL Hwy
Suite, Apt. #, etc.
22
City & State
23 PANACEA FL
Zip 24 32346 County 25 WAKULLA

2a. Mailing Address
26 48 COASTAL Hwy
Suite, Apt. #, etc.
27
City & State
28 PANACEA FL
Zip 29 32346 County 30 WAKULLA

4. FEI Number: 59-3106671 — 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 ability to be responsible for under S. 19.0.0 Florida Statutes [ ] Yes [ ] No

9. Name and Address of Current Registered Agent
LOBDILL, EVALINDA O.
*RT. 1 BOX 3186 48 COASTAL Hwy
(HWY 98 OCHLOCKONEE BAY)
PANACEA FKL 32346
FL

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable): 48 COASTAL Hwy
83
84 City: PANACEA FL 85 Zip Code: 32346

11. Pursuant to the provisions of Section 607.1622 and 607.1608, 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 appropriate board of directors. Thereby, it is certified that the registered office identified in paragraph 2 and 2a, and/or the registered agent identified in paragraph 9 and 10 of this report, is/are identical to the registered office and/or registered agent identified in the most recent annual report filed with the Department of State, Division of Corporations, Tallahassee, Florida.

SIGNATURE

12. OFFICERS AND DIRECTORS

Title	Name	Address
	PVTS	
NAM	HUNTER, LINDA S.	
	RT. 1 BOX 3186	
	PANACEA FL	

13. ADDITIONS, CHANGES TO OFFICERS AND/OR DIRECTORS

Title	Name	Address	Change / Addition
		8 HEATHER DR	✓ Change / Addition
			Change / Addition
			Change / Addition
			Change / Addition
			Change / Addition
			Change / Addition

14. I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall be in compliance with the requirements of Chapter 607 of the Florida Statutes. I further certify that I am familiar with the provisions of Chapter 607, Florida Statutes, and that I am in compliance with the requirements of Chapter 607, Florida Statutes.

SIGNATURE: Linda S Hunter — 4-30-95
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

0029602 CP