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**APPROVED
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95 MAY -1 PM 4:14

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # **V17887** (3)
1. Corporation Name
BIG M. INC.

Principal Place of Business Mailing Address
**2905 EAST CERVATES
PENSACOLA FL 32503** **2905 EAST CERVATES
PENSACOLA FL 32503**

DO NOT WRITE IN THIS SPACE.

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 02/28/1992	3a. Date of Last Report 04/29/1994
21		26		4. FEI Number 59-3110283	Applied For Not Applicable
22 Suite, Apt. #, etc.		27 Suite, Apt. #, etc.		5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
23 City & State		28 City & State		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24 Zip	25 Country	29 Zip	30 Country	6. This corporation has liability for intangible tax under S. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent
**KYPREOS, SPIRO T.
1755 ST. MARY AVENUE, SUITE C
PENSACOLA FL 32501**

10. Name and Address of New Registered Agent

81 Name JESSIE M MURRAY
82 Street Address (P.O. Box Number is Not Acceptable) 305 GARCON POINT RD
83 City Milton
84 State FL
85 Zip Code 32583

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 607.0501, Florida Statutes.

SIGNATURE: *Jessie M Murray* **JESSIE M MURRAY** DATE: **4/28/95**

12. OFFICERS AND DIRECTORS

TITLE	D
NAME	MURRAY, JESSIE
STREET ADDRESS	305 GARCON POINT ROAD
CITY - ST - ZIP	MILTON FL
TITLE	D
NAME	MURRAY, VERALD H.
STREET ADDRESS	305 GARCON POINT ROAD
CITY - ST - ZIP	MILTON FL
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	900001532449
1.4 CITY - ST - ZIP	-07/07/95--01055--012
2.1 TITLE	*****70.00 <input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	900001532449
2.4 CITY - ST - ZIP	-07/07/95--01055--013
3.1 TITLE	*****130.00 <input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	5/1/95
5.4 CITY - ST - ZIP	US
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

REMITTED BY MAY 1

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(3)(b), 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 11 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Jessie M Murray* **JESSIE M MURRAY** DATE: **4/28/95** **901.4924994**