

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

**APPROVED
AND
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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
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DOCUMENT # V17887 (3)

1. Corporation Name
BIG M. INC.

Principal Place of Business 2905 EAST CERVATES PENSACOLA FL 32503	Mailing Address 2905 EAST CERVATES PENSACOLA FL 32503
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DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified 02/28/1992		3a. Date of Last Report 04/29/1994	
2. Principal Place of Business 21		2a. Mailing Address 26	
Suite, Apt. #, etc. 22		Suite, Apt. #, etc. 27	
City & State 23		City & State 28	
Zip 24	Country 25	Zip 29	Country 30
4. FEI Number 59-3110283		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
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	
5.4 CITY - ST - ZIP	
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** TIME: **9:01:49** PLACE: **4924994**