FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

APPROVED
9:15
OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **V20709** **(4)**

1. Corporation Name

INTERNATIONAL FORM CORPORATION

Principal Place of Business	Mailing Address
233 TRESCA RD JACKSONVILLE FL 32225	233 TRESCA RD JACKSONVILLE FL 32225

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 03/12/1992	3a. Date of Last Report: 04/25/1994
4. FEI Number: 59-3120096	[ ] 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. [ ] Yes [ ] No	

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

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
LAPRELL, SAMUEL L. 1301 GULF LIFE DR SUITE 1500 JACKSONVILLE FL 32207	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 ... and ... 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. ... I hereby accept the appointment as registered agent ...

SIGNATURE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS
TITLE	PD	[ ] Change [ ] Addition
NAME	SHERRER, ARTHUR JR	
STREET ADDRESS	233 TRESCA RD	
CITY-ST-ZIP	JACKSONVILLE FL	
TITLE	DST	[ ] Change [ ] Addition
NAME	NASH, WILLIAM E	
STREET ADDRESS	4190 BELFORT ROAD SUITE 475	
CITY-ST-ZIP	JACKSONVILLE FL	
TITLE	D	[ ] Change [ ] Addition
NAME	PEYTON, HERBERT H	
STREET ADDRESS	11340 SCOTT MIL ROAD	
CITY-ST-ZIP	JACKSONVILLR FL	
TITLE	DC	[ ] Change [ ] Addition
NAME	TOWERS, CHARLES D	
STREET ADDRESS	1301 GULF LIFE DRIVE SUITE 1500	
CITY-ST-ZIP	JACKSONVILLE FL	
TITLE	D	[ ] Change [ ] Addition
NAME	CARUSO, JOHN E	
STREET ADDRESS	9875 ATLANTIC BLVD	
CITY-ST-ZIP	JACKSONVILE FL 32225	
TITLE		[ ] Change [ ] Addition
NAME		
STREET ADDRESS		
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 ... 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: A Sherrer — 5/4/95 — (904) 725-8500

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Arthur Sherrer

0019079 CP