

2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000005751

Entity Name: BLACK, CORLEY, OWENS & HUGHES, P.A.**Current Principal Place of Business:**219 W SOUTH STREET
BENTON, AR 72015**Current Mailing Address:**219 W SOUTH STREET
BENTON, AR 72015**FEI Number:** 71-0566949**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**NATIONAL CORPORATE RESEARCH,LTD.,INC.
115 NORTH CALHOUN ST.
SUITE 4
TALLAHASSEE, FL 32301 US*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.***SIGNATURE:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	PRESIDENT AND DIRECTOR
Name	CORLEY, JOHN A
Address	219 W SOUTH STREET
City-State-Zip:	BENTON AR 72015

Title	VICE PRESIDENT AND DIRECTOR
Name	BLACK, LARRY A
Address	219 W SOUTH STREET
City-State-Zip:	BENTON AR 72015

Title	SECRETARY, TREASURER AND DIRECTOR
Name	OWENS, LESLIE A
Address	219 W SOUTH STREET
City-State-Zip:	BENTON AR 72015

Title	PARTNER AND DIRECTOR
Name	BLACK, BRIAN S
Address	219 W. SOUTH STREET
City-State-Zip:	BENTON AR 72015

Title	PARTNER AND DIRECTOR
Name	HUGHES, MICHAEL L
Address	219 W. SOUTH STREET
City-State-Zip:	BENTON AR 72015

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: JOHN A. CORLEY**PRESIDENT****04/15/2016**_____
Electronic Signature of Signing Officer/Director Detail_____
Date