

**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)**

PROFIT CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **404280** (0)
1. Corporation Name
COTTAGE HILL ESTATES, INC.



Principal Place of Business: **900 NORTH 12TH AVENUE
P.O. DRAWER 13207
PENSACOLA FL 32591-0207**

Mailing Address: **900 NORTH 12TH AVENUE
P.O. DRAWER 13207
PENSACOLA FL 32591-0207**

3. Date Incorporated or Qualified: **06/30/1972**

3a. Date of Last Report: **01/17/1995**

4. FEI Number: **59-1546877**

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 liability for intangible tax under s. 199.032, Florida Statutes: Yes No

2. Principal Place of Business: 21 Suite, Apt. #, etc: 22 City & State: 23 Zip: 24 Country: 25

2a. Mailing Address: 26 Suite, Apt. #, etc: 27 City & State: 28 Zip: 29 Country: 30

9. Name and Address of Current Registered Agent

**GUND, CHARLES F.
900 NORTH 12TH AVENUE
PENSACOLA FL 32573**

10. Name and Address of New Registered Agent

81 Name: _____

82 Street Address (P.O. Box Number is Not Acceptable): _____

83 _____

84 City: _____

85 Zip Code: **FL** _____

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 607.0505, Florida Statutes.

SIGNATURE

Signature of principal place of business agent (if applicable)

(NOTE: Registered Agent signature required when registering)

DATE:

12. OFFICERS AND DIRECTORS

TITLE: **PD** DELETE
NAME: **GUND, CHARLES F.**
STREET ADDRESS: **900 NORTH 12TH AVENUE**
CITY-ST-ZIP: **PENSACOLA FL**

TITLE: **V** DELETE
NAME: **CORRY, J.E.**
STREET ADDRESS: **900 NORTH 12TH AVENUE**
CITY-ST-ZIP: **PENSACOLA FL**

TITLE: **V** DELETE
NAME: **WILHOIT, WILLIAM M.C.**
STREET ADDRESS: **1711 EAST LAKEVIEW AVE.**
CITY-ST-ZIP: **PENSACOLA FL**

TITLE: **TD** DELETE
NAME: **CORRY, J.E.**
STREET ADDRESS: **900 NORTH 12TH AVENUE**
CITY-ST-ZIP: **PENSACOLA FL**

TITLE: **SD** DELETE
NAME: **WILHOIT, WILLIAM M.C.**
STREET ADDRESS: **1711 EAST LAKEVIEW AVE.**
CITY-ST-ZIP: **PENSACOLA FL**

TITLE: _____ DELETE
NAME: _____
STREET ADDRESS: _____
CITY-ST-ZIP: _____

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE: _____ Change Addition
1.2 NAME: _____
1.3 STREET ADDRESS: _____
1.4 CITY-ST-ZIP: _____

2.1 TITLE: _____ Change Addition
2.2 NAME: _____
2.3 STREET ADDRESS: _____
2.4 CITY-ST-ZIP: _____

3.1 TITLE: _____ Change Addition
3.2 NAME: _____
3.3 STREET ADDRESS: _____
3.4 CITY-ST-ZIP: _____

4.1 TITLE: _____ Change Addition
4.2 NAME: _____
4.3 STREET ADDRESS: _____
4.4 CITY-ST-ZIP: _____

5.1 TITLE: _____ Change Addition
5.2 NAME: _____
5.3 STREET ADDRESS: _____
5.4 CITY-ST-ZIP: _____

6.1 TITLE: _____ Change Addition
6.2 NAME: _____
6.3 STREET ADDRESS: _____
6.4 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 119.07(3)(c), 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 (if changed) or an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JUN 5 1996

DATE: _____

CR2E034 (3/96)