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FILED
Apr 24 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # 765030 (2)
1. Corporation Name
MARTIN BAYOU MANAGEMENT CORPORATION



Principal Place of Business: 4820 N. LAKEWOOD DR. PANAMA CITY FL 32404 US
Mailing Address: 4820 N LAKEWOOD DR PANAMA CITY FL 32404-6621 US

2. Principal Place of Business (21-23), 2a. Mailing Address (26-28), 24. Zip, 25. Country, 29. Zip, 30. Country

3. Date Incorporated or Qualified: 09/15/1982
3a. Date of Last Report: 02/01/1996
4. FEI Number: 06-0416470
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

9. Name and Address of Current Registered Agent
FAUCHEUX, PATRICK J.
845 JENKS AVE.
PANAMA CITY FL 32401

10. Name and Address of New Registered Agent
81 Name: ROBERT RADCLIFF
82 Street Address (P.O. Box Number is Not Acceptable): 902 JOAN LANE
83
84 City: PANAMA CITY FL 85 Zip Code: 32404

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.
SIGNATURE: ROBERT RADCLIFF (NOTE Registered Agent signature required when reinstating) DATE: 4/18/97

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE: PD	SMITH, MICHAEL 842 NILES DRIVE PANAMA CITY FL	<input checked="" type="checkbox"/> DELETE	
TITLE: VD	ALLICK, SAMUEL 4504 MISTY LANE LYNN HAVEN FL	<input type="checkbox"/> DELETE	
TITLE: SD	ST. MARTIN, HENRI 7509 SARA LANE PANAMA CITY FL	<input checked="" type="checkbox"/> DELETE	
TITLE: TD	RADCLIFF, ROBERT 902 JOAN LANE PANAMA CITY FL	<input type="checkbox"/> DELETE	
TITLE: D	SIDNEY, KENNETH 521 SOUTH STAR AVE. PANAMA CITY FL	<input type="checkbox"/> DELETE	
TITLE: D	BAUBLIS, JOSEPH 2018 SHAMROCK LANE LYNN HAVEN FL	<input type="checkbox"/> DELETE	

1.1 TITLE: D	WHEELER, RICHARD 1447 PARKWAY DRIVE PANAMA CITY, FL 32404	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.1 TITLE: PD		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.1 TITLE: SD	MURRAY, JOHN 312 N. JAMES AVE PANAMA CITY, FL 32404	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.1 TITLE: D		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.1 TITLE: VD		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
6.1 TITLE: D		<input type="checkbox"/> Change <input type="checkbox"/> Addition

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 on an attachment with an address.

SIGNATURE: ROBERT RADCLIFF (REQUIRED) DATE: 4/18/97 904-286-6500

CR2E037 (9/96)