FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999

1. Corporation Name



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Feb 22, 1999 8:00 am Secretary of State

02-22-1999 90033 002 ***150.00

DAT AIN	CHAFT OWNERS, INC.				 				
Principal Place	e of Business	Mailing Address			$\overline{}$	i imbirist das rafiri ciust racol a		91911 BIBN 61511 1	1811 61611 1881
218 WOODLAW	'N DRIVE	218 WOODLAND DRIVE			Ì				
PANAMA CITY BEACH FL 32407 PANAMA CITY BEACH FL 324 US US			32407	407		DO NOT WRITE IN THIS SPACE			
US		US				3. Date Incorporated or Qualifed			
					}	04/12/1989)
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number		Ap	plied For
21		26			[59-2995773		No	Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired		\$8.75	dditional
22		27				3. Certificate of Status Desired		Fee Re	quired
City & Stat	e	City & State)	6. Election Campaign Financing		\$5.00	,
23		28				Trust Fund Contribution		Added t	Fees
Zip —	Country	Zip	Coun	try	(8. This corporation owes the cur	rent year In	tangible	□No
24	9. Name and Address of Current	29	30			Personal Property Tax. 10. Name and Address of New	Pagietarad		LINO
	9. Name and Address of Current	Registered Agent		81 Name		10. Name and Address of New	Registered	Agent	
BRO	WN, JOSEPH M.								
218 WOODLAWN DRIVE			{	Street /	Addres	s (P.O. Box Number is Not Accept	able)		
PAN	AMA CITY BEACH FL 32407		h.	83					
			L						
];	B4 City			FL	85 Zip (Code
office or r	to the provisions of Sections 607.0502 egistered agent, or both, in the State of m familiar with, and accept the obligation	f Florida. Such change was all pns of, Section 607.0505, Flo	uthorized rida Statui らぬかい	by the corpo es. 	oration'	s board of directors. Thereby acces $z ho \omega \sim g - g - g - g$	purpose of pt the appo	intment as re	registered gistered
	Signature, typed of printed name of registered agent			gent signature n	w beniuper		DATE	ID DIDECTO	70 111 40
12.	OFFICERS AND	DIRECTORS	13.			ADDITIONS/CHANGES TO OF	FICERS A	AD DIKECIO	K5 IN 12
TITLE '	DT NEAL 134		1,0100		1			hange	☐ Addition
NAME	NEAL, J.W.		4 0 5 1 4 5	-				Change	☐ Addition
STREET ADDRESS	4400 MADI INIC TOCCT		1.2 NAA	KE	4	122 MADIN STE	EET	Change	☐ Addition
CITY-ST-ZIP	4122 MARLINS TREET		1.3 STR	EET ADORESS	4	IZZ MARLIN STE	EET	(4 Change	Addition
	PANAMA CITY BEACH FL 32408		1.3 STR	KE EET ADORESS (-ST-ZIP	4	IZZ MARLIN STE	eet		
TITLE	PANAMA CITY BEACH FL 32408 SD	B □ DELETE	1.3 STR 1.4 C/T 2.1 T/TL	RE EET ADORESS (-ST-ZIP E	4	IZZ MARLIN STE	EET	P Change	Addition
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TITLE NAME STREET ADDRESS	PANAMA CITY BEACH FL 32408 SD BROWN, JOSEPH M. 218 WOODLAWN DR.		1.3 STR 1.4 CIT 2.1 TITL 2.2 NAA 2.3 STR	ME EET ADORESS (-ST-ZIP E ME EET ADORESS				Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PANAMA CITY BEACH FL 32408 SD BROWN, JOSEPH M. 218 WOODLAWN DR. PANAMA CITY FL	□ DEL€TE	1.3 STR 1.4 CIT 2.1 TITL 2.2 NAA 2.3 STR	ME EET ADDRESS (-ST-ZIP E ME EET ADDRESS Y-ST-ZIP		IZZ MARLIN STE		Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	PANAMA CITY BEACH FL 32408 SD BROWN, JOSEPH M. 218 WOODLAWN DR. PANAMA CITY FL DV		1.3 STR 1.4 C/P 2.1 T/TL 2.2 NAA 2.3 STR 2.4 C/T 3.1 T/TL	RE EET ADORESS (-ST-ZIP E AE EET ADORESS Y-ST-ZIP E				(1) Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	PANAMA CITY BEACH FL 32408 SD BROWN, JOSEPH M. 218 WOODLAWN DR. PANAMA CITY FL DV BRUCE, WILLIAM GREGORY	□ DEL€TE	1.3 STR 1.4 CIP 2.1 TITL 2.2 NAA 2.3 STR 2.4 CIT 3.1 TITL 3.2 NAA	RE EET ADDRESS (-ST-ZIP E RE EET ADDRESS Y-ST-ZIP E RE				(1) Change	Addition
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6.4 CITY-ST-ZIP 14. I 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed or on an attachment with an address, with all other like empowered.

SIGNATURE:

JOSEPH M. BROWN 99-01-06 850-234-4879