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

CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

P94000087773 (5) DOCUMENT #

QUIETWATER WINGS, INC.

Principal Place of Business Mailing Address 400 QUIETWATER BEACH ROAD 385 HIGHWAY 98 EAST. SUITE 40 DESTIN FL 32541 PENSACOLA FL \$2561 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 11/29/1994 2. Principal Place of Business 4. FEI Number 2a. Mailing Address 59-3289785 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be

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25 9. Name and Address of Current Registered Agent MOORHEAD, STEPHEN R 4300 BAYOU BLVD. SUITE 13 PENSACOLA FL 32504

Country

23 Zip

CITY-ST-ZIP

		Trust Fund Contribution
Country		8. This corporation owes or has paid the current year Intangible Personal Property Tex due June 30. Yes No
		10. Name and Address of New Registered Agent
	81	Name
	82	Street Address (P.O. Box Number is Not Acceptable)
	83	
	RA	City DE Zio Codo

FILED

May 15 1998 8:00am

Secretary of State

Applied For

Fee Required

Not Applicable

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, typed or printed hanc of registered agent and little if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITLE DELETE Addition 1 1 TiTLE Change FOX. ROBERT L NAME 1.2 NAME 385 HIGHWAY 98 EAST, SUITE 40 STREET ADDRESS 1.3 STREET ADDRESS DESTIN FL 32541 CITY-ST-ZIP 1.4 GITY-ST-ZIP DELETE TITLE 2.1 TITLE Change Addition 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CHY-ST-ZIP DELETE ☐ Addition TITLE 3.1 TITLE Change NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - \$1 - ZIP DELETE TITLE 4.1 TITLE Change Addition NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE TITLE Change 5.1 TITLE ■ Addition NAME 5.2 NAME STREET ADDRESS 53 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-S1-ZIP □ DELETE Addition TITLE 6.1 TITLE Change NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

6.4 CITY - ST - ZIP 14. Thereby 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 addre

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