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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

FILED
May 19 1998 8:00am
Secretary of State

	MENT # P9600 DINT PROPERTY OWNERS				
Principal Place	of Business	Mailing Address			
	D BEACH ROAD	100 DELWOOD BEACH R	OAD		
PANAMA CITY		PANAMA CITY FL 32407			
				DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified	——- ₁
,				01/05/1996	1
2. Principal Pla	ace of Business	2a. Mailing Address		4. FEI Number 59-249 7.5-26 Applied	For
al .		26 P.O. Box	27089	APPLIED FOR Not App	
Suite, Apt.	#, etc	Suite, Apt. #, etc.	<u> </u>	\$8.75 Additi	
22		27		5. Certificate of Status Desired Fee Require	d
City & State)	City & State	177	Election Campaign Financing \$5.00 May	Be
:3		Panama Ci	ty , FL	Trust Fund Contribution Added to Fed	
Zip	Country	Z _p 99411	Country	8. This corporation owes or has paid the current year Inlangib	le
24	25 a. Name and Address of Curre	29 32411	30 Bay	Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent	
Cui	PMAN, IVIS	III Hogistorea Agorit	81 Name	IU. Itanio and Addices of from Neglatored Agent	
	DOLPHIN DRIVE				
	NAMA CITY FL 32411		82 Street	Address (P.O. Box Number is Not Acceptable)	ļ
101	MANUAL OFFICE SEATT		83		
	•				
	•		84 City	FL 85 Zip Code	
11, Pursuant to office or reagent I an	o the provisions of Sections 607 05 agistered agent, or both in the State in familiar with, and accept the oblig	02 and 607.1508, Florida Statut c of Florida Such change was a jutions of, Section 607.0505, Flo	es, the above-named authorized by the corp orida Statutes.	corporation submits this statement for the purpose of changing its regionation's board of directors. I hereby accept the appointment as regis	istered tered
11, Pursuant to office or reagent I am SIGNATURE	Ivis Chipman, l	02 and 607, 1508, Florida Statuti c of Florida, Such change was a jutions of, Section 607,0505, Flo Manager per under diagnosable (NOTE ND DIRECTORS	es, the above-named authorized by the corporida Statutes. Registered Agent's gnature.	corporation submits this statement for the purpose of changing its reporation's board of directors. I hereby accept the appointment as regis 4/27/98 Togeted when renstating) ADDITIONS/CHANGES TO OFFICERS AND PIRECTORS IN	
SIGNATURE	Ivis Chipman, l	Manager	Registered Agent signature	corporation submits this statement for the purpose of changing its reporation's board of directors. I hereby accept the appointment as regis 4/27/98 required when reinstalling) ADDITIONS/CHANGES TO OFFICERS AND PIRECTORS IN	
SIGNATURE 3	Ivis Chipman, Stgman,	Manager NO DIRECTORS	Registered Agent's gnature	corporation submits this statement for the purpose of changing its reporation's board of directors. I hereby accept the appointment as regis 4/27/98 TORRIGH WHEN TENSION SOUTH STATE ADDITIONS/CHANGES TO OFFICERS AND PRECTORS IN Connor, Donald P.	12
SIGNATURE 5	Ivis Chipman, I Signature, Typest or produce transcent to get the concentration of the period of the	Manager NO DIRECTORS	Registered Agent's gnature 13. 1.1 TITLE	corporation submits this statement for the purpose of changing its reporation's board of directors. I hereby accept the appointment as regis 4/27/98 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN Connor, Donald P. 128 Dragon's Circle	12
SIGNATURE	Ivis Chipman, I Stgnature, Typed or produce result to get brown or OFFICERS AN PD DEVED, RICHARD 198 MARLIN CIRCLE PANAMA CITY FL 32411	Manager personal tree diaggeral la (NOTE NO OIRT CTORS DELETE	13. 1.1 TILLE 1.2 NAME	corporation submits this statement for the purpose of changing its reporation's board of directors. I hereby accept the appointment as regis 4/27/98 Consumed when renstaling DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN Connor, Donald P. 128 Dragon's Circle Panama City, FL 32411	12 Addition
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4. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f). 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 congraticition for the receiver or trustoe empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if clyanged, door an affactive of this an address.

CICALATUDE.

Mil 27 199

850-233 HB6