

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

**FILED**

**Feb 24 1997 8:00am  
Secretary of State**

**PROFIT CORPORATION ANNUAL REPORT 1997**



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

**DOCUMENT # P96000093791 (7)**

1. Corporation Name  
**UNIT 1011 SUMMIT, INC.**



Principal Place of Business  
**25 WALTER MARTIN ROAD NE  
FORT WALTON BEACH FL 32548**

Mailing Address  
**25 WALTER MARTIN ROAD NE  
FORT WALTON BEACH FL 32548-4918**

3. Date Incorporated or Qualified **11/15/1996** 3a. Date of Last Report

2. Principal Place of Business  
21 **35000 Emerald Coast Hwy**  
22 **Destin FL**  
23 **32541**  
24 **32541**

2a. Mailing Address  
26 **35000 Emerald Coast Hwy**  
27 **Destin FL**  
28 **32541**

4. FEI Number  Applied For  
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  
**GRIMSLEY, JAMES W  
25 WALTER MARTIN ROAD NE  
FORT WALTON BEACH FL 32548**

10. Name and Address of New Registered Agent  
81 Name **Edward H. Seymour**  
82 Street Address (P.O. Box Number is Not Acceptable) **35000 Emerald Coast Parkway**  
83 **Destin FL**  
84 **32541**

11. Pursuant to the provisions of Sections 607.0502 and 607.0505, 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]*  
DATE: \_\_\_\_\_

| 12. OFFICERS AND DIRECTORS |  |
|----------------------------|--|
| TITLE                      | <input checked="" type="checkbox"/> DELETE |
| NAME                       | <b>D GRIMSLEY, JAMES W</b>                 |
| STREET ADDRESS             | <b>25 WALTER MARTIN ROAD NE</b>            |
| CITY - ST - ZIP            | <b>FORT WALTON BEACH FL 32548</b>          |
| TITLE                      | <input type="checkbox"/> DELETE            |
| NAME                       |  |
| STREET ADDRESS             |  |
| CITY - ST - ZIP            |  |
| TITLE                      | <input type="checkbox"/> DELETE            |
| NAME                       |  |
| STREET ADDRESS             |  |
| CITY - ST - ZIP            |  |
| TITLE                      | <input type="checkbox"/> DELETE            |
| NAME                       |  |
| STREET ADDRESS             |  |
| CITY - ST - ZIP            |  |

| 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 |  |
|---|--|
| 1.1 TITLE   | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| 1.2 NAME  | <b>P William W Abbott, Jr.</b>   |
| 1.3 STREET ADDRESS                                    | <b>35000 Emerald Coast Parkway</b>   |
| 1.4 CITY - ST - ZIP                                   | <b>Destin, FL 32541</b>  |
| 2.1 TITLE   | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| 2.2 NAME  | <b>VP Stephen J. Abbott</b>  |
| 2.3 STREET ADDRESS                                    | <b>35000 Emerald Coast Parkway</b>   |
| 2.4 CITY - ST - ZIP                                   | <b>Destin FL 32541</b>   |
| 3.1 TITLE   | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| 3.2 NAME  | <b>S/T Edward H. Seymour</b>   |
| 3.3 STREET ADDRESS                                    | <b>35000 Emerald Coast Parkway</b>   |
| 3.4 CITY - ST - ZIP                                   | <b>Destin, FL 32541</b>  |
| 4.1 TITLE   | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| 4.2 NAME  | <b>D James R. Skinner, Jr.</b>   |
| 4.3 STREET ADDRESS                                    | <b>35000 Emerald Coast Parkway</b>   |
| 4.4 CITY - ST - ZIP                                   | <b>Destin FL 32541</b>   |
| 5.1 TITLE   | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| 5.2 NAME  | <b>D James J. Olin</b>   |
| 5.3 STREET ADDRESS                                    | <b>35000 Emerald Coast Parkway</b>   |
| 5.4 CITY - ST - ZIP                                   | <b>Destin, FL 32541</b>  |
| 6.1 TITLE   | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| 6.2 NAME  | <b>D Carmela Bell</b>  |
| 6.3 STREET ADDRESS                                    | <b>35000 Emerald Coast Parkway</b>   |
| 6.4 CITY - ST - ZIP                                   | <b>Destin FL 32541</b>   |

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 reports 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.

SIGNATURE: *[Signature]*  
DATE: \_\_\_\_\_

CR2E034 (9/96)