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



PROFIT CORPORATION
 ANNUAL REPORT
 1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

01-22-1999 90017 048 ****150.00

DOCUMENT # P96000093791

1. Corporation Name
UNIT 1011 SUMMIT, INC.



Principal Place of Business
**35000 EMERALD COAST PKWY.
 DESTIN FL 32541
 US**

Mailing Address
**35000 EMERALD COAST PKWY.
 DESTIN FL 32541
 US**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		11/15/1996	
22 City & State		27 City & State		4. FEI Number	
23 Zip		28 Zip		59-3426163	
24 Country		29 Country		Applied For	
25		30		Not Applicable	
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent	
SEYMOUR, EDWARD H. 35000 EMERALD COAST PARKWAY DESTIN FL 32541				81 Name	
				82 Street Address (P.O. Box Number is Not Acceptable)	
				83	
				84 City	
				85 Zip Code	
				FL	
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				DATE	

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	P	DELETE		1.1 TITLE	Change		Addition
NAME	ABBOTT, WILLIAM J. J.			1.2 NAME			
STREET ADDRESS	35000 EMERALD COAST PARKWAY			1.3 STREET ADDRESS			
CITY-ST-ZIP	DESTIN FL			1.4 CITY-ST-ZIP			
TITLE	VP	DELETE		2.1 TITLE	Change		Addition
NAME	ABBOTT, STEPHEN J.			2.2 NAME			
STREET ADDRESS	35000 EMERALD COAST PARKWAY			2.3 STREET ADDRESS			
CITY-ST-ZIP	DESTIN FL			2.4 CITY-ST-ZIP			
TITLE	ST	DELETE		3.1 TITLE	Change		Addition
NAME	SEMOUR, EDWARD H.			3.2 NAME			
STREET ADDRESS	35000 EMERALD COAST PARKWAY			3.3 STREET ADDRESS			
CITY-ST-ZIP	DESTIN FL			3.4 CITY-ST-ZIP			
TITLE	D	DELETE		4.1 TITLE	Change		Addition
NAME	STEINER, JAMES R. J.			4.2 NAME			
STREET ADDRESS	25000 EMERALD COAST PARKWAY			4.3 STREET ADDRESS			
CITY-ST-ZIP	DESTIN FL			4.4 CITY-ST-ZIP			
TITLE	D	DELETE		5.1 TITLE	Change		Addition
NAME	OLIN, JAMES S.			5.2 NAME			
STREET ADDRESS	25000 EMERALD CAOST PARKWAY			5.3 STREET ADDRESS			
CITY-ST-ZIP	DESTIN FL			5.4 CITY-ST-ZIP			
TITLE	D	DELETE		6.1 TITLE	Change		Addition
NAME	BELL, CARMELA			6.2 NAME			
STREET ADDRESS	35000 EMERALD COAST PARKWAY			6.3 STREET ADDRESS			
CITY-ST-ZIP	DESTIN FL			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: *[Signature]* SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/6/99

Daytime Phone #

CR2E034 (11/98)