

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

FILED
Feb 27 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998



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

DOCUMENT # P97000071846 (4)

1. Corporation Name
SKYLER TALLAHASSEE, INC.



DO NOT WRITE IN THIS SPACE

Principal Place of Business: **125 WEST ROMANA STREET ONE PENSACOLA PLAZA, SUITE 400 PENSACOLA FL 32501**
 Mailing Address: **125 WEST ROMANA STREET ONE PENSACOLA PLAZA, SUITE 400 PENSACOLA FL 32501**

3. Date Incorporated or Qualified
08/19/1997

2. Principal Place of Business (21-24) and Mailing Address (25-30) fields with sub-sections for Suite, Apt. #, etc., City & State, Zip, and Country.

4. FEI Number: **59-3489761** Applied For: Not Applicable
 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 owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

9. Name and Address of Current Registered Agent
BELL, SCOTT J
125 WEST ROMANA STREET
ONE PENSACOLA PLAZA, SUITE 400
PENSACOLA FL 32501

10. Name and Address of New Registered Agent (81-85)
 81 Name
 82 Street Address (P.O. Box Number is Not Acceptable)
 83
 84 City **FL** 85 Zip Code

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: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

12. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> DELETE
NAME	BELL, SCOTT J	
STREET ADDRESS	125 WEST ROMANA STREET #400	
CITY-ST-ZIP	PENSACOLA FL 32501	
TITLE	D	<input type="checkbox"/> DELETE
NAME	ST. PE', GERALD	
STREET ADDRESS	1000 LITTON ACCESS ROAD	
CITY-ST-ZIP	PASCAOULA MS 39567	
TITLE	D	<input type="checkbox"/> DELETE
NAME	WILLIAMS, ROY C	
STREET ADDRESS	711 DELMAS AVENUE	
CITY-ST-ZIP	PASCAOULA MS 39567	
TITLE	D	<input type="checkbox"/> DELETE
NAME	FOSTER, DANA R	
STREET ADDRESS	125 WEST ROMANA STREET	
CITY-ST-ZIP	PENSACOLA FL 32501	
TITLE	D	<input type="checkbox"/> DELETE
NAME	TOLAN, JOHN J JR	
STREET ADDRESS	125 WEST ROMANA STREET	
CITY-ST-ZIP	PENSACOLA FL 32501	
TITLE	D	<input type="checkbox"/> DELETE
NAME	HOLLOWAY, J L	
STREET ADDRESS	2372 HIGHWAY 80 WEST	
CITY-ST-ZIP	JACKSON MS 39204	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	
13 STREET ADDRESS	
14 CITY-ST-ZIP	
21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	
23 STREET ADDRESS	
24 CITY-ST-ZIP	
31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	
33 STREET ADDRESS	
34 CITY-ST-ZIP	
41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	
43 STREET ADDRESS	
44 CITY-ST-ZIP	
51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	
53 STREET ADDRESS	
54 CITY-ST-ZIP	
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	
63 STREET ADDRESS	
64 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.

SIGNATURE: _____

CP2E034 (10/97)