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

PROFIT CORPORATION ANNUAL REPORT

1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000085802 (5)

Principal Place of Business	Mailing Address
8340 FRONT BEACH RD.	8340 FRONT BEACH RD.
PANAMA CITY BEACH FL 32407	PANAMA CITY BEACH FL 324

FILED Mar 19 1998 8:00am Secretary of State

FACILI	TY LEASING, INC.					
Principal Plac	e of Business	Mailing Address		- I realiabt HA LOUDA HIN BANG MAHN MANN MENAN	LOTOL ONAL FOLL) OBINA MAI INC.	
8340 FRONT		8340 FRONT BEACH RD				
PANAMA CIT	TY BEACH FL 32407	PANAMA CITY BEACH F	L 32407	DO NOT WRITE IN THE	S SPACE	
				3. Date Incorporated or Qualified		
				12/10/1993		
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	Applied For	
21		26		59-3216740	Not Applicable	
Suite, Apt.	#, etc	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional	
22 City & Stat		City & State			Fee Required	
23 City & Stat	e	28		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip	Country	7(p)	Country	8. This corporation owes or has paid the o		
24	26	29	30	Personal Property Tax due June 30.	Yes X No	
	9. Name and Address of Currer	nt Registered Agent		10. Name and Address of New Registers	d Agent	
SI	HERRELL, DEAN		81 Name			
	213 GRAND BAY BLVD.		82 Street Addr	ess (P.O. Box Number is Not Acceptable)		
P/	NAMA CITY BEACH FL 32408		<u> </u>			
			83			
			84 City		85 Zip Code	
44 0	to the providers of Contain COT Off	22 and CO7 45 09. Florido Ctatus	as the shows named core	F		
11. Pursuant to the provisions of Speciens 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office of 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 and profile with, and recept the appointment as registered agent. I and profile with, and recept the appointment as registered agent.						
	no wniliar with, and recept the oblid				:/00	
SIGNATURE	Signature tyles photocranon of registers and		DEAN SHEKKEL E Registered Agent signature require			
12.		D DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12	
TITLE	P	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition	
NAME	SHERRELL, DEAN		1.2 NAME			
STREET ADDRESS	8213 GRAND BAY BLVD.	• • • •	1.3 STREET ADDRESS		ļ	
CITY-ST-ZIP	PANAMA CITY BEACH FL 3		1.4 CITY - ST - ZIP		1 A 4 8 9 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
TITLE	S CHEODEN LINDA	▼ DELETE	2.1 TITLE		Change Addition	
NAME	SHERRELL, LINDA		2.2 NAME			
STREET ADDRESS	8213 Grand Bay Blvd. Panama City Beach Fl 33	2400	2 3 STREET ADDRESS			
CITY-ST-ZIP	T	Z DELETE	2. 4 CHY-ST-ZIP 3.1 TIFLE		Change Addition	
NAME	PATE, SANDRA J	ES DICCIE	3.2 NAME			
STREET ADDRESS	2856 TUPELO DRIVE		3.3 STREET ADDRESS			
CITY-ST-ZIP	PANAMA CITY FL 32405		3.4. CITY - ST - ZIP			
TITLE		DELETE	4.1 TITLE		Change Addition	
NAME			4. 2 NAME		ì	
STREET ADDRESS			4.3 STREET ADDRESS			
City-St-Zip			4.4 CITY-ST-ZIP			
TITLE		DELETE	5.1 TITLE		Change Addition	
NAME			52 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
CITY - ST - ZIP		······································	5.4 CITY-ST-ZIP		01	
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition	
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS		1	
CITY-ST-ZIP			64 CITY-ST-ZIP		1	

polied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information emontal 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 an receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in a study ment with an address

DEAN SHERRELL, PRESIDENT 1/15/98 904 230 3010