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

Mailing Address

STE E

7510 E THOMAS DRIVE

PANAMA CITY BEACH FL 32408

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000009618

Principal Place of Business 7510 E THOMAS DRIVE

PANAMA CITY BEACH FL 32408

SIGNATURE

AMERICAN REALTY OF BAY COUNTY, INC.

US US						01/29/1996						
2. Principal Place of Business 2a. Mailing Add			ess			4. FEI Number			Appl	ied For		
21	26					59-3366338			Not	Applicable		
Suite, Apt. #, etc. Suite, Apt. #, etc.							1	\$8.7	75 Ad	ditional		
22						5. Certifcate of Status Desired L		Fe	e Req	uired		
City & State City & State						6. Election Campaign Financing		\$5.	00 N	lay Be		
28						Trust Fund Contribution Added to Fees						
Zip	Country	Zip	Country			8. This corporation owes the current year Intangible						
24	25	29	0			Personal Property Tax.		Yes]No		
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent							
					81 Name							
VIEJO, TONY VEGAS				82 Street Address (P.O. Box Number is Not Acceptable)								
205 NAUTILUS ST				Sileet Address (F.O. Dox Hamber is Not Acceptable)								
PANAMA CITY BEACH FL 32413				3								
				↓.								
			84	* C	City		FL	85	Zip Co	ode		
11 Pursuant t	to the provisions of Sections 607 050	2 and 607 1508. Florida Statutes	the abov	/e-na	amed corpo	oration submits this statement for the pur	pose of c	hangin	g its r	egistered		
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.												
agent. I ar	m familiar with, and accept the obligat	tions or, Section 607.0505, Florid	ia Statute	S.						,, •		
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered					ngture required	when reinstation)	DATE	·. 4	-	<u> </u>		
					Jilatoro roquireo	ADDITIONS/CHANGES TO OFFIC		D DIRE	CTOR	S IN 12		
TITLE	PST	DELETE		1,1 TITLE				[iii] Cha		Addition		
	VIEJO, TONY VEGAS		1.2 NAME									
NAME	DOE NATIONAL OF				NDOECC .							
STREET ADDRESS	# = - · · · · · ·		1.3 STREI									
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NAME				2.2 NAME								
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NAME			5.2 NAME									
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CITY-ST-ZIP			5.4 CITY-	ST-ZII	iP							
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NAME		_	6.2 NAME									
				REET ADDRESS						,		
STREET ADDRESS					ı							

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.

FILED

Mar 04, 1999 8:00 am Secretary of State

03-04-1999 90013 050 ***150.00

DO NOT WRITE IN THIS SPACE