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PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 333236 (8)

1. Corporation Name

TRADE WINDS OF PANAMA CITY, INC.



Principal Place of Business

Mailing Address

12513 FRONT BEACH RD
PANAMA CITY BEACH FL 32407

12513 FRONT BEACH RD
PANAMA CITY BEACH FL 32407

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SPRINGER, H.C. JR.
12513 FRONT BEACH RD.

PANAMA CITY BCH FL 32407

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when substituting)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD ☐ DELETE

1.1 TITLE ☐ Change ☐ Addition

NAME SPRINGER, H.C., JR.

1.2 NAME

STREET ADDRESS 501 WAHOO RD.

1.3 STREET ADDRESS

CITY- ST- ZIP PANAMA CITY BCH. FL 32411

1.4 CITY- ST- ZIP

TITLE VD ☐ DELETE

2.1 TITLE ☐ Change ☐ Addition

NAME JOLLY, MAYE S.

2.2 NAME

STREET ADDRESS 41 RANDOLPH RD.

2.3 STREET ADDRESS

CITY- ST- ZIP BIRMINGHAM AL 35213

2.4 CITY- ST- ZIP

TITLE VD ☐ DELETE

3.1 TITLE ☐ Change ☐ Addition

NAME SPRINGER, ALLAN D.

3.2 NAME

STREET ADDRESS 7438 ALICE ROAD

3.3 STREET ADDRESS

CITY- ST- ZIP MCCALLA AL 35111

3.4 CITY- ST- ZIP

TITLE SD ☐ DELETE

4.1 TITLE ☐ Change ☐ Addition

NAME BRISTOW, ALICE S.

4.2 NAME

STREET ADDRESS 7980 BEAU RIDGE LANE

4.3 STREET ADDRESS

CITY- ST- ZIP MCCALLA AL 35111

4.4 CITY- ST- ZIP

TITLE ☐ DELETE

5.1 TITLE ☐ Change ☐ Addition

NAME

5.2 NAME

STREET ADDRESS

5.3 STREET ADDRESS

CITY- ST- ZIP

5.4 CITY- ST- ZIP

TITLE ☐ DELETE

6.1 TITLE ☐ Change ☐ Addition

NAME

6.2 NAME

STREET ADDRESS

6.3 STREET ADDRESS

CITY- ST- ZIP

6.4 CITY- ST- ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

H.C. SPRINGER JR

Date

1/22/96

Daytime Phone

904-234-2222

CR2E034 (12/95)