

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

FILED

May 20 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # 348479 (7)

1. Corporation Name  
OKALOOSA INVESTMENT ENTERPRISES, INC

Principal Place of Business  
1078 SOUTH FERDON BLVD  
SUITE B  
CRESTVIEW FL 32536  
US

Mailing Address  
1078 SOUTH FERDON BLVD  
SUITE B  
CRESTVIEW FL 32536-4510  
US



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 06/25/1969		3a. Date of Last Report 08/20/1996	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 59-1976336		Applied For Not Applicable	
22	City & State	27	City & State	5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
23	Zip	28	Country	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
24	Country	29	Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No			

9. Name and Address of Current Registered Agent MARK WELTON & ASSOCIATES, P.A. 1078 SOUTH FERDON BLVD SUITE B CRESTVIEW FL 32536				10. Name and Address of New Registered Agent			
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]* DATE: 5-1-97  
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	P	<input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
NAME	WELTON, MARK		1.2 NAME				
STREET ADDRESS	1078 SOUTH FERDON BLVD		1.3 STREET ADDRESS				
CITY-ST-ZIP	CRESTVIEW FL 32536		1.4 CITY-ST-ZIP				
TITLE	VP	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
NAME	WELTON, MOLLY		2.2 NAME				
STREET ADDRESS	1078 SOUTH FERDON BLVD		2.3 STREET ADDRESS				
CITY-ST-ZIP	CRESTVIEW FL 32536		2.4 CITY-ST-ZIP				
TITLE	S	<input checked="" type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
NAME	SLAVENS, DAVE		3.2 NAME				
STREET ADDRESS	1078 SOUTH FERDON BLVD		3.3 STREET ADDRESS				
CITY-ST-ZIP	CRESTVIEW FL 32536		3.4 CITY-ST-ZIP				
TITLE	T	<input checked="" type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
NAME	LUNDY, GARY		4.2 NAME				
STREET ADDRESS	1078 SOUTH FERDON BLVD		4.3 STREET ADDRESS				
CITY-ST-ZIP	CRESTVIEW FL 32536		4.4 CITY-ST-ZIP				
TITLE		<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREET ADDRESS				
CITY-ST-ZIP			5.4 CITY-ST-ZIP				
TITLE		<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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 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: *[Signature]* DATE: 5-1-97

CR2E034 (9/96)