

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 01, 1999 8:00 am
Secretary of State

04-01-1999 90001 046 ***150.00

DOCUMENT # 385319

1. Corporation Name

FLORIDA MUTUAL LAND DEVELOPMENT, INC.

Principal Place of Business

132 FAIRVIEW ROAD
MARRIANA FL 32448
US

Mailing Address

132 FAIRVIEW ROAD
MARRIANA FL 32448
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/14/1971

4. FEI Number

59-1410904

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 the current year Intangible
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

21 403 WOOD TRAIL
Suite, Apt. #, etc.

2a. Mailing Address

26 403 WOOD TRAIL
Suite, Apt. #, etc.

City & State

23 PANAMA CITY, FL

City & State

28 PANAMA CITY, FL

24 32405 25 USA 29 32405 30 USA

9. Name and Address of Current Registered Agent

GARRETT, ARTHUR G
132 FAIRVIEW ROAD
MARIANNA FL 32448

10. Name and Address of New Registered Agent

81 Name GARRETT, ARTHUR G.
82 Street Address (P.O. Box Number is Not Acceptable)
403 WOOD TRAIL
83
84 City PANAMA CITY FL 85 Zip Code 32405

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 reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE P
NAME GARRETT, ARTHUR G
STREET ADDRESS 132 FAIRVIEW ROAD
CITY-ST-ZIP MARRIANA FL 32448

TITLE ST
NAME CRISP, DONALD
STREET ADDRESS 011 WEST 23RD STREET
CITY-ST-ZIP PANAMA CITY, FL 32405

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS 403 WOOD TRAIL
1.4 CITY-ST-ZIP PANAMA CITY, FL 32405

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/1/99

Date

850-913-0702

Daytime Phone #

CR2E034 (11/98)