DOCUMENT #         413874         (9)           CREDIT BUREAU OF FORT WALTON BEACH, INC.         Image: constraints of the cons	ANNU	PROFIT PORATION JAL REPORT 1996	Sand Sand Secr	PARTMENT OF STATE ra B. Mortham etary of State DF CORPORATIONS		
	1. Corporation	n Name	<b>\</b> -∕			
Manage of Busines         Manage Address           PTI NORTH CALLEN PARKWAY P.O. BOX 5300 FORT WAICON BEACH FL 3249         3. Evalue Increase with the Address of Call Paper 12(01/1972         3a. Evalue Increase with the Address of Call Paper 12(01/1972         3b. Evalue Increase with the Address of Call Paper 12(01/1972         3b. Evalue Increase with the Address of Call Paper 12(01/1972         3b. Evalue Increase with the Address of Call Paper 12(01/1972         3b. Evalue Increase with the Address of Call Paper 12(01/1972         3b. Evalue Increase with the Address of Call Paper 12(01/1972         3b. Evalue Increase with the Address of Call Paper 12(01/1972         3b. Evalue Increase with the Address of Call Paper 12(01/1972         3b. Confector of Status Desired 12(01/1972         12(01/1972         12(01/1972         12(01/1972         12(01/1972         12(01/1972         12(01/1972         12(01/1972         12(01/1972         <	CRED	IT BUREAU OF FORT WALT	ION BEACH, INC.			
Proceeding Place of Blances         2a. Noting Astress         4. FETMander         Ischer	711 NORTH P.O. BOX 2	i Eglin Parkway 500	711 NORTH EGLIN P.O. BOX 2500		3. Date Incorporated or Qualified	3a. Date of Last Report
Suite, April, etc. Suite, April, etc. Proceedings of Suite Proceedings of Suite Pro	- ·	ace of Business			4. FEI Number	Applied For
City & State       City & State       City & State       Electronic Compage Francing       S5.00 May Be Addees of Current 28         20       20       Country       Electronic Compage Francing       S5.00 May Be Addees of Current Registered Agent         9       20       20       Country       Intel corporation has fabrity for rategible tax urders is 190.022. Francisco 1 Nov Registered Agent         0       9. Name end Address of Current Registered Agent       81       Nonco         COULEY, TOMMY M. 711 NORTH EQUIN PARKWAY       81       Nonco       82         FT. WALTON BEACH FL 32548       84       CAy       FL       65         80       CAy       FL       65       ZD Code         11. Parsuent to the provisions of Sections 607.0502 and 607.1506. Florids Statutes, the above named corporation submits this statument for the provisions of Sections 007.0502 and 607.1506. Florids Statutes       FL       61       ZD Code         11. Parsuent to the provisions of Sections 807.0502 and 607.1506. Florids Statutes       Total integration adjust the statument for the provisions adjust the appointment estrepistered agent.       FL       61       ZD Code         12. Parsuent to the provisions of Sections 807.0502 and 607.1506. Florids Statutes       Total integration adjust the appointment estrepistered agent.       Total integration adjust the appointment estrepistered agent.       Total integration adjust the appointment estrepistered agent. <td>Suite, Apt. 4</td> <td>¥, etc.</td> <td>Suite, Apt. #, etc.</td> <td></td> <td></td> <td>\$8.75 Additional</td>	Suite, Apt. 4	¥, etc.	Suite, Apt. #, etc.			\$8.75 Additional
ZPD     Country     Zpo     Country     R. The coparison is labelity for intargible fact rules is 100.032.       9     30     Find defense of Current Registered Agent     10. Herne and Address of New Registered Agent       COULEY, TOMMY M.       711 NORTH EQLIN PARKWAY     81     Name       PT. WALTON BEACH FL 32548     81     Street Address P <sup>2</sup> O. Box Numbor is Not Acceptable       Receive address P <sup>2</sup> O. Box Numbor is Not Acceptable       In under the provisions of Sections 607.0502 and 607.1508. Florida Strates, The above named corporation submits this statement for the provisions of Sections 607.0502 and 607.1508. Florida Strates, The above named corporation submits the statement for the provisions of Sections 607.0502 and 607.1508. Florida Strates, The above named corporation submits the statement for the provisions of Sections 607.0502 and 607.1508. Florida Strates, The above named corporation submits the statement for the provisions of Sections 607.0502 and 607.1508. Florida Strates, The above named corporation submits the statement for the provisions of Sections 6000.0500. Forder Strates       Street Address P <sup>2</sup> .0. Box Numbor is Not Acceptable       International model accept the objection of Sections Strates       Street Address P <sup>2</sup> .0. Box Numbor is Not Acceptable       International model accept the objection of sections Strates       International model accept the objection of Section Box 00.0500. Forder Strates       Street Address P <sup>2</sup> .0. Box Numbor is Not Acceptable       Internating	City & State		City & State			<b>\$5.00</b> May Be
COOLEY, TOMMY M. 711 NORTH EQUIN PARKWAY FT. WALTON BEACH FL 32548       81       Name         82       Street Address (P.C. Box Number is Not Acceptable)       83         84       City       FL       65       Zp Code         85       Street Address (P.C. Box Number is Not Acceptable)       FL       65         86       City       FL       65       Zp Code         87       Address (P.C. Box Number is Not Acceptable)       Dot       Dot         88       Obt (Page in Address (P.C. Box Number is Not Acceptable)       Dot       Dot         87       OCOLEY, ToMMY M       Table consols (Page in Address (P.C. Box Number is Not Acceptable)       Dot         88 <td>1</td> <td>25</td> <td>29</td> <td></td> <td>Florida Statutes</td> <td>intangible tax under s 199.032, □ No</td>	1	25	29		Florida Statutes	intangible tax under s 199.032, □ No
COOLEY, TOMMY M.       711 NORTH EQUIN PARKWAY         F1. WALTON BEACH FL 32548       88         B4       Cluy       B3         B4       Cluy       B4         Cluy       B4       Cluy         B4       Cluy       B4         B4       Cluy       Cluy         B4       Cluy       Cluy       D4         B4       Cluy<		9. Name and Address of Current	t Registered Agent	81 Name	10. Name and Address of New R	tegistered Agent
IILE PD	1. Pursuant to or registere	o the provisions of Sections 607.0502 ad agent, or both, in the State of Florid h, and accept the obligations of, Sectio	and 607, 1508, Fiorida Stati la. Such change was author on 607,0505, Fiorida Statute	utes, the above named corporized by the corporation's boa	oration submits this statement for the pur ard of directors. I hereby accept the appo	FL
STREET ADDRESS       712 MOORE CIRCLE       13 STREET ADDRESS         VITLE       S       IDELETE       21 TITLE         AMA       COOLEY,OLIVIA D.       22 NAME         YRET ADDRESS       712 MOORE CIRCLE       23 STRET ADDRESS         VITLE       D       23 STRET ADDRESS         VITLE       D       23 STRET ADDRESS         VITLE       D       IDELETE         STRET ADDRESS       712 MOORE CIRCLE         VITLE       D       IDELETE         STRET ADDRESS       712 MOORE CIRCLE         VITLE       D       IDELETE         STRET ADDRESS       33 STRETA ADDRESS         VITLE       D       IDELETE         STRET ADDRESS       33 STRETA ADDRESS         MARY       ESTHER FL       34 CITY - ST-2P         MARY       D       IDELETE         STRET ADDRESS       712 MOORE CIRCLE       41 TITE         VITLE       D       IDELETE       34 CITY - ST-2P         MARY       COOLEY,OLIVA D.       22 NAME       24 CITY - ST-2P         VITLE       IDELETE       41 TITE       IDELETE         VITLE       IDELETE       51 TITE       Change       Addition         STRET ADDRESS	<ol> <li>Pursuant to or registere familiar wit</li> <li>SIGNATURE</li> </ol>	n, and accept the obligations of, Sections Styres again a section of the section	on 507.0505, Florida Statute and tile Yapplicable.	utes, the above named corporized by the corporation's boates.	red when reins taking)	PL prose of changing its registered office ointment as registered agent. I am
IttST-2#     PANAMA CITY FL     14 CitySt-2#       ItLE     IDELETE     2 11 ItLE       AMA     COOLEY,OLIVIA D.     22 NAME       YRET ADDRESS     712 MOORE CIRCLE     23 STRET ADDRESS       PANAMA CITY FL     24 CitySt-2#       PANAMA CITY FL     23 STRET ADDRESS       Ift.E     D       Ift.E     D       Ift.F     D       Ift.F     D       D     DELETE       411/1-S1-2#       MARY ESTHER FL     34 City-st-2#       Ift.F     D       D     DELETE       42 Cityst-2#       MARY ESTHER FL     34 City-st-2#       Ift.F     D       D     DELETE       44 City-st-2#       MAR     COOLEY,OLIVIA D.       Ift.F     D       Ift.F	<ol> <li>Pursuant to or registera familiar wit</li> <li>GIGNATURE</li> <li>I2.</li> </ol>	II, and accept the obligations of, Section Signalium, typodicripmited name of registerod april a OFFICERS AND PD	on 607.0505, Florida Statute end tile if applicates.	utes, the above named corporized by the corporation's boales.	red when reins taking)	PL pose of changing its registered office ointment as registered agent. I am DATE ICERS AND DIRECTORS IN 12
AME     COOLEY, OLIVIA D.     22 NAME       IPEET ADDRESS     712 MOORE CIRCLE     23 STREET ADDRESS       IP. ST-ZIP     PANAMA CITY FL     24 CITY-ST-ZIP       ITLE     D     DELETE     3.1 TILE       AMF     VON DER OSTEN, JOANN     32 NAME       TREFT ADDRESS     138 MIRAMAR DRIVE.     33 STREET ADDRESS       INY-ST-ZIP     MARY ESTHER FL     34 CITY-ST-ZIP       MARY     D     DELETE     4 11TLE       AMF     COOLEY, OLIVIA D.     4 2 NAME       IREET ADDRESS     712 MOORE CIRCLE     4 3 STREET ADDRESS       INY-ST-ZIP     MARY ESTHER FL     34 CITY-ST-ZIP       MAR     COOLEY, OLIVIA D.     4 NAME       IREET ADDRESS     712 MOORE CIRCLE     4 3 STREET ADDRESS       ITLE     DELETE     5 TITLE       AME     COOLEY, OLIVIA D.     42 NAME       IREET ADDRESS     712 MOORE CIRCLE     4 3 STREET ADDRESS       ITLY-ST-ZIP     44 CITY-ST-ZIP     44 CITY-ST-ZIP       IPLE     DELETE     5 TITLE     Change       IPLET ADDRESS     5 3 STREET ADDRESS     5 3 STREET ADDRESS       ITY-ST-ZIP     STREET ADDRESS     5 3 CITY-ST-ZIP       IPLE ODRESS     S 3 STREET ADDRESS     5 3 STREET ADDRESS       IPLY-ST-ZIP     STREET ADDRESS <td< td=""><td>Pursuant to or register familiar wit SIGNATURE    </td><td>II, and accept the obligations of, Section Signature, typed or printed name of registered again to OFFICERS AND PD COOLEY,TOMMY M</td><td>on 607.0505, Florida Statute end tile if applicates.</td><td>NOTE Registered Agent signature require  13.  1.1 TITLE  1.2 NAME</td><td>red when reins taking)</td><td>The second secon</td></td<>	Pursuant to or register familiar wit SIGNATURE	II, and accept the obligations of, Section Signature, typed or printed name of registered again to OFFICERS AND PD COOLEY,TOMMY M	on 607.0505, Florida Statute end tile if applicates.	NOTE Registered Agent signature require  13.  1.1 TITLE  1.2 NAME	red when reins taking)	The second secon
TREFI ADDRESS       712 MOORE CIRCLE       23 STREET ADDRESS         PANAMA CITY FL       24 CITY-S1-7/P         ITLE       D       DELETE         AMF       VON DER OSTEN, JOANN       32 NAME         ITLE ADDRESS       188 MIRAMAR DRIVE.       33 STREET ADDRESS         ITLE D       DELETE       34 CITY-S1-2/P         MARY ESTHER FL       34 CITY-S1-2/P         MARY ESTHER FL       34 CITY-S1-2/P         MARE       COOLEY, OLIVIA D.         ITLE ADDRESS       712 MOORE CIRCLE         Y-S1-2/P       PANAMA CTTY FL         MARE       COOLEY, OLIVIA D.         ITLE ADDRESS       712 MOORE CIRCLE         Y-S1-2/P       44 DITY-S1-2/P         PANAMA CTTY FL       42 NAME         ITLE ADDRESS       712 MOORE CIRCLE         Y-S1-2/P       44 DITY-S1-2/P         PANAMA CTTY FL       44 DITY-S1-2/P         VIE       DELETE       5 STREET ADDRESS         ITY-S1-2/P       AddItion         AME       52 NAME         ITLE ADDRESS       53 STREET ADDRESS         ITY-S1-2/P       54 CITY-S1-2/P         ITLE       DELETE       61 TITLE         ITLE       DELETE       61 TITLE	Pursuant to or register familiar wit SIGNATURE     .      .	II, and accept the obligations of, Section Signature, typed or printed name of registered agard a OFFICERS AND PD COOLEY,TOMMY M 712 MOORE CIRCLE	on 607.0505, Florida Statute end tile if applicates.	NOTE Flogistered Agent signature require 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS	red when reins taking)	The second secon
IIIY-SL-ZIP       PANAMA CITY FL       24 CITY-SL-ZIP         ITLE       D       DELETE       3.1 TITLE         IAME       VON DER OSTEN, JOANN       32 NAME         ITRET ADDRESS       188 MIRAMAR DRIVE.       3.3 STREET ADDRESS         ITY-SL-ZIP       MARY ESTHER FL       34 CITY-SL-ZIP         ITLE       D       DELETE         ITLE       D       Change         ITLE       D       Change         ITLE       DELETE       4.1 TITLE         ITLE       DELETE       4.3 STREET ADDRESS         ITLE       Addition       4.2 NAME         ITLE       Addition       4.3 STREET ADDRESS         ITLY ST-ZIP       Addition       5.1 TITLE         ITLE       DELETE       5.1 TITLE         ITLE       S.1 STREET ADDRESS       5.3 STREET ADDRESS         ITLE       S.1 STREET ADDRESS       5.4 CITY-ST-ZIP         ITLE       S.1 STREET ADDRESS       5.3 STREET ADDRESS         ITLE       S.1 STREET ADDRESS       5.4 CITY-ST-ZIP	<ol> <li>Pursuant to or register familiar wit</li> <li>SIGNATURE</li> <li>IRE</li> <li>IRE</li> <li>IRE</li> <li>IRE I ADDRESS</li> <li>IRE I ADDRESS</li> <li>IRE I ADDRESS</li> <li>IRE I ADDRESS</li> </ol>	h, and accept the obligations of, Section Signation, typed or printed name of registered agart a OFFICERS AND PD COOLEY,TOMMY M 712 MOORE CIRCLE PANAMA CITY FL S	on 607.0505, Florida Statute and THe Perpleated	NOTE Fragistered Agent signature require 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CHY+ST-ZIP	red when reins taking)	PL     prose of changing its registered officiontment as registered agent. I am      DATE      ICERS AND DIRECTORS IN 12      Change Addition
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