SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999. AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State **DIVISION OF CORPORATIONS** 

**DOCUMENT #** 

**FILED** Jul 20, 1999 8:00 am Secretary of State

07-20-1999 90024 039 \*\*\*550.00

PANAMA PINES, INC.			
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Drivers of President	Mailing Address		
Principal Place of Business	<del>-</del>		
8728 CR 2301 -POCT OFFICE BOX 505	P O BOX 565 POST OFFICE BOX 565		
YOUNGSTOWN FL 32466	PANAMA CITY F 3240		DO NOT WRITE IN THIS SPACE
US	US		3. Date Incorporated or Qualified
			02/18/1975
2. Principal Place of Business	2a. Mailing Address	2 2 -4	4. FEI Number Applied For
21	26 7. a Box	237	<b>59–1895780</b> Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired \$8.75 Additional
22	27		Fee Required
City & State	Oity & State		6. Election Campaign Financing \$5.00 May Be
23	28 LYNN TUAVE	N 16	Trust Fund Contribution Added to Fees
Zip Country	Zip AAA	County	8. This corporation owes the current year
25 25	29 32444 3	10	Intangible Personal Property. Yes No
9. Name and Address of Current	Registered Agent		10. Name and Address of New Registered Agent
AAAANI AMANII I		81 Name	W. GERALI HAMM
MANN, JOHN L		82 Street Add	dress (P.O. Box Number is Not Acceptable)
130 EAST CENTRAL AVE		1	007 JENKS AVE
LAKE WALES FL 33853		83	
		21 01 1	95 Zin Code
no.		84 City	NAMA CTY FL 85 32401
11. Pursuant to the provisions of sections 607.0502	and 607.1508. Florida Statutes.	the above-named corpo	protion submits this statement for the purpose of changing its registered
office or registered agent, or both, in the State of	of Florida. Such change was au	thorized by the corporat	tion's board of directors. I hereby accept the appointment as registered
			1 1 2 1 99
SIGNATURE W. Carald Hamm / Ledin Signature, typed or printed name of registered agent	ian : <u>Hamm &amp;</u> Dreye	E: Registered Agent signature rec	quired when reinstating) DATE
12. OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE PD	DELETE	1,1 TITLE	Change Addition
NAME STEWART, JR G	<b>M</b>	1.2 NAME	
STREET ADDRESS 8728 CR 2301		1,3 STREET ADDRESS	
CITY-ST-ZIP YOUNGSTOWN FL 32466		1,4 CITY-ST-ZIP	
TITLE VP	DELETE	2.1 TITLE	DRES DICELTOR XChange Addition
OTTIVIBE OLDER W	☐ pereve		
0700 00 0004	· · · · · · · · · · · · · · · · · · ·		CTC I LAPT ( CARY W)
VOLINICOTOWAL CL 20400		2.2 NAME	STEWART GASEW III
		2.3 STREET ADDRESS	8728 CR 2301 C 334//
		2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	8728 CR 230 FZ 32466
TITLE	DELETE	2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE	YOUNGSTOWN FE 32466  YP/DREETOR Change. Addition
	DELETE	2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME	B72B CR 230   F2 32466 YOUNGSTOWN F2 32466 YP/DREETOR GABEW IZ Change. Addition
TITLE	DELETE	2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS	B72B CR 230 FZ 32466 YOUNGSTOWN FZ 32466 YP/DIRECTOR STEWART GABEW IX 3728 CR 2301 C 32446
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP		2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	B72B CR 230 FZ 32466 YOUNGSTOWN FZ 32466 YP/DRIETOR STEWART GABEW IX 3728 CR 2301 YOUNGSTOWN FL 32466
TITLE NAME STREET ADDRESS	☐ DELETE	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	B72B CR 230 FE 32466 YOUNGSTOWN FE 32466 YP/DIRECTOR STEWNRT GABEW IX 3728 CR 2301 YOUNGSTOWN FL 32466 YOUNGSTOWN FL 32466 YOUNGSTOWN FL 32466
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP		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	B72B CR 230 FE 32466 YOUNGSTOWN FE 32466 YP/DIRECTOR STEWNRT GABEW IX 3728 CR 2301 YOUNGSTOWN FL 32466 YOUNGSTOWN FL 32466 YOUNGSTOWN FL 32466
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TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE 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	B72B CR 230 FZ 32466 YOUNGSTOWN FZ 32466 YP/DRIETOR STEWART GABEW IX 3728 CR 2301 YOUNGSTOWN FL 32466
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TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	☐ DELETE	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	STEWART GABEW IX  STEWART GABEW IX  128 CR 2301  YOUNGSTOWN FL 32466  SEC/TRES/DIRECTOR Grange Addition  STEWART, SALLY L  B728 CR 2301
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	☐ DELETE	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	STEWART GABEW IX  STEWART GABEW IX  128 CR 2301  YOUNGSTOWN FL 32466  SEC/TRES/DIRECTOR Grange Addition  STEWART, SALLY L  B728 CR 2301
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TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME TREET ADDRESS CITY-ST-ZIP TITLE	☐ DELETE	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	STEWART GABEW IX  10016STOWN FZ 32466  STEWART GABEW IX  10016STOWN FZ 32466  SEC/TRES/DIRECTOR Grange Addition  STEWART, SALLY L  8728 CR 230 FZ 32466  Grange Addition

SIGNATURE:

14. I hereby certify that the information supplied with the 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 of 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 received states and that my name appears in Block 12 or Block 13 if changed or again attachment with an address.