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

CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 488738

(6)

TWAR INVESTMENT GROUP, INC.

Mailing Address

1074 SEABREEZE LANE **GULF BREEZE FL 32561** 

Principal Place of Business

1074 SEABREEZE LANE **GULF BREEZE FL 32561-3338** 

## **FILED** Jan 14 1997 8:00am Secretary of State



					<ol> <li>Date Incorporated or Qualified</li> <li>10/31/1975</li> </ol>	3a. Date of Last Report 01/24/1996
a Directo D	iace of Business	2a. Mailing Add	irose		4. FEI Number	Applied For
2. Philogram	MOCO DESMOSS	26 Nation of Acc	uss		59-1645461	Not Applicable
Suite, Apt. #, etc Suite, Apt. #, etc.			etc		38 1043401	\$9.75 Additional
22 27		, oto.		5. Certificate of Status Desired	Fee Required	
City & State City & State					6. Election Campaign Financing	\$5.00 May Be
23		28			Trust Fund Contribution	Added to Fees
Zip	Country	7 <sub>(p)</sub>	Cc	ountry	8. This corporation has liability for	
24	25	29	30		, , , , , , , , , , , , , , , , , , , ,	☑ Yes ☐ No
······································	9. Name and Address of Curre	ent Registered Agent		T	10. Name and Address of New Ro	egistered Agent
WO	FE, ROBERT	•		81 Name		
7201 BAYSHORE DRIVE				82 Street A	Address (P.O. Box Number is Not Accepta	bla\
MILTON,,FL. 32583				OF Street P	rodiess (F.O. Box Number is Not Accepta	Die)
				83		
				84 City		85 Zip Code
				11		FL 15 2 P COGE
11. Pursuant office or r	to the provisions of Sections 607.05 eaistereo acidat for both in the Stat	i02 and 607.1508, Fior le of Flordal Such cha	ida Statutes, the . nge was authoriz	above-named ( ed by the corp	corporation submits this statement for the oration's board of directors. Thereby acce	purpose of changing its registered of the appointment as registered
agent La	rd lamiliar with and accept the obli	gations of Section 607	<sup>7</sup> .0505, Florida St	atutes.	oration's board of directors. I hereby acce	
SIGNATURE	Signature Type For photochhamic Objects Ford a	nent and the intepolicable	INOTé Registes	red Agent signature	required when reinstating)	DATE
12.		ND DIRECTORS	13		ADDITIONS/CHANGES TO OFFI	CERS AND DIRECTORS IN 12
TITLE	DV	<u> </u>	ELETE 1.1	TITLE		Change Addition
NAME	RASCOE, WALTER		1.2	NAME		
STREET ADDRESS	1074 SEABREEZE LANE			STREET ADDRESS		
C I'r - ST - ZiP	GULF BREEZE FL		. 4	CITY - ST - ZIP		
THE	PD			TITLE		Change Addition
NAME	WOLFE, ROBERT		22	NAME		
STREET ADDRESS	7201 BAYSHORE DR.		23	STREET ADDRESS		
CITY - ST - ZPP	MILTON FL			CITY-ST-ZIP		
THEF	SDT			TITLE		Change Addition
NAME	RASCOE,BETTY		32	NAME		
STREET ADDRESS	1074 SEABREEZE LANE			STREET ADDRESS		
CHTY - ST - 7-F	GULF BREEZE FL			CITY - ST - ZIP		
Tiff.F	DV	] []		TITLE		☐ Change ☐ Addition
NAME	WOLFE, MARY		4 2	NAMÉ		•
STREET ADDRESS	7201 BAYSHORE DR.		43	STREET ADDRESS		
CITY-ST-ZIP	MILTON FL			CITY-ST-7:P		
TITLE		] [		TITLE		Change Addition
MAME		_		NAME		_ · · —
STREET ADDRESS				STREET ADDRESS		
C-TY-S1-ZIP				CITY-ST-ZIP		
TIFLE	,			TITLE		Change Addition
NAME:				NAME		<u> </u>
STREET ADDRESS				STREET ADDRESS		
				i		
CITY ST ZIF			64	City - ST - ZIP		

14. I do hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicator 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 physiged, or on an attachment with an address.

SIGNATURE: