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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(3)

BILL AND BLANKENSHIP, INC.

BONIFAY FL 32425

FILED Apr 29 1998 8:00am Secretary of State

.] #**r**apan andi **ka**ar bilah filih **sala**a ikin oleh alah rabi akan akan alah alah akak

P	rincipal Place of Business	Mailing Addres	SS	A CORPOR CONTROL BOND OR BANK OR DO AND STOLE DIGHT CHOIL CLOCK CHOIL CHOIL CHOIL CHOIL CHOIL CHOIL CHOIL	
-	12106 FRONT BEACH RD P O BOX 8010 1/ PANAMA CITY BEACH FL 32407 US	2600 BRUCE (-P.O. BOX 004 PANAMA CITY US		DO NOT WRITE IN THIS 3. Date Incorporated or Qualified	S SPACE
_	Principal Place of Business	2a. Mailing Address		06/18/1976 4. FEI Number	Applied For
21	Suite, Apt. #, etc.	26 Suite, Apt. #, etc.		59-1696896 6. Certificate of Status Desired	\$8.75 Additional Fee Required
23	City & State City & State		· · · · · · · · · · · · · · · · · · ·	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
24	Zip Country	Zip 29	Country 30	This corporation owes or has paid the corporation owes or has paid the corporation of the part of	urrent year Intangible
Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent	
	COLE, RUSSELL A. JR. 123 NORTH OKLAHOMA		81 Name		

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				
	Signatura, typed or printed name of registered agent and		Registered Agent signature red	
12.	OFFICERS AND DIF		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PD	☐ DELETE	1.1 TITLE	Change Addition
NAME	BILL, KARL-ERIK		1.2 NAME	
STREET ADDRESS	2600 BRUCE COURT		1.3 STREET ADDRESS	
CITY-ST-ZIP	PANAMA CITY BCH. FL		1.4 CITY-ST-ZIP	
TITLE	8	DELETE	2.1 TITLE	Change Addition
HAME	BILL, ELSA		2.2 NAME	
STREET ADDRESS	2600 BRUCE COURT		2.3 STREET ADDRESS	' +
CITY-ST-ZIP	PANAMA CITY BCH. FL		2.4 CITY-ST-ZIP	
TITLE	D	☐ DELETE	3.1 TITLE	Change Addition
NAME	BILL, ELSA		3.2 NAME	
STREET ADDRESS	2800 BRUCE COURT		3.3 STREET ADDRESS	
CITY-ST-ZIP	Panama City BCH. FL		3.4 CITY-ST-ZIP	
TITLE		☐ DELETE	4.1 TITLE	Change Addition
NAME			4. 2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP			4.4 CITY - ST - ZIP	
TITLE		☐ DELETE	5.1 TITLE	Change Addition
NAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP			5.4 CITY - ST - ZIP	
TITLE		☐ DELETE	6 1 TITLE	Change Addition
NAME			6.2 NAME	
STREET ADDRESS			6 3 STREET ADDRESS	

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 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 trusted 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:

Kail E. BiLL

V 24. 11 850-234-1820

Zip Code