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Apr 14 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 506223

(7)

1. Corporation Name

PANAMA CITY PROPERTIES, INC.

Principal Place of Business

12908 AIR WAY STREET
PANAMA CITY FL 32404
US

Mailing Address

1500 SAN REMO AVE
STE 239
CORAL GABLES FL 33146-3047
US



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified		3a. Date of Last Report	
21		26 12908 Air Way Street		06/30/1976		03/19/1996	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number		Applied For	
22		27		59-1674217		Not Applicable	
City & State		City & State		5. Certificate of Status Desired		<input type="checkbox"/> \$8.75 Additional Fee Required	
23		28 Panama City, FL		<input type="checkbox"/> \$5.00 May Be Added to Fees		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	
Zip	Country	Zip	Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes			
24 32404-2833	25	29 32404-2833	30 U.S.A.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			

9. Name and Address of Current Registered Agent

HUGHEY, BONNIE
1500 SAN REMO AVE
STE 239
CORAL GABLES FL 33146-3047

10. Name and Address of New Registered Agent

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL

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		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	P/D
NAME	YOUNG, DAVID F.	1.2 NAME	Young, David F.
STREET ADDRESS	1500 SAN REMO AVE. #245	1.3 STREET ADDRESS	12908 Air Way Street
CITY-ST-ZIP	CORAL GABLES FL 54	1.4 CITY-ST-ZIP	Panama City, FL 32404-2833
TITLE	VT	2.1 TITLE	V/T
NAME	HUGHEY, BONNIE J.	2.2 NAME	Hughey, Bonnie J.
STREET ADDRESS	1500 SAN REMO AVE. #239	2.3 STREET ADDRESS	1500 San Remo Avenue, Suite 239
CITY-ST-ZIP	CORAL GABLES FL 47	2.4 CITY-ST-ZIP	Coral Gables, FL 33146-3047
TITLE	F	3.1 TITLE	
NAME	HUGHEY, BONNIE J.	3.2 NAME	
STREET ADDRESS	1500 SAN REMO AVE. #239	3.3 STREET ADDRESS	
CITY-ST-ZIP	CORAL GABLES FL 54	3.4 CITY-ST-ZIP	
TITLE	VS	4.1 TITLE	V/S
NAME	YOUNG, JUDITH C	4.2 NAME	Young, Judith C.
STREET ADDRESS	1500 SAN REMO AVE SUITE 245	4.3 STREET ADDRESS	12908 Air Way Street
CITY-ST-ZIP	CORAL GABLES FL 54	4.4 CITY-ST-ZIP	Panama City, FL 32404-2833
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this form 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 supplement to a prior 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 registered agent or registered agent in charge of the corporation to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 of this report or on an attachment to this report.

SIGNATURE: 
David F. Young, President/Director

3/5/97 (904) 871-4616

Date

Daytime Phone #

0204548

CR2E034 (9/96)