## 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 # 604

604018

(2)

HARRISON, KENNON AND ASSOCIATES, P.A.

## FILED Feb 20 1998 8:00am Secretary of State

Principal Place of Business Mailing Address						I 1884A BILIA BOLA BIDA BUDA 1800 I 1901	AIDII DHUN BHAN		
1012 WEST 11TH STREET 1012 WEST 11TH STREET					(				
PANAMA CITY FL 32401 PANAMA CITY FL 32401						SO NOT WEST IN THE OPING			
						DO NOT WRITE IN THIS SPACE			
						3. Date Incorporated or Qualified			
2. Principal Place of Business 2a. Mailing Address						12/27/1972 4. FEI Number		ĪΔr	plied For
21	26					59-1466656		<del></del>	ot Applicable
Sulte, Apt. #, etc. Suite, Apt. #, etc.							\$8		Additional
22						5. Certificate of Status Desired			equired
City & Sta	City & State City & State					6. Election Campaign Financing	\$	5.00	May Be
23	28			<u> </u>		Trust Fund Contribution		dded t	to Fees
Zip	Country	Zip	Cour	itry		8. This corporation owes or has paid			
24	25 29 30 9. Name and Address of Current Registered Agent					Personal Property Tax due June 30 10. Name and Address of New Regis			_ No
	<del></del>	it uedistaten Watti		B1	Name	IV. Hame and Address of New Nega	Main Wall		
TANTROUN, FRANKLIN N.									
PANAMA CITY FL 32401				82	Street Addres	ss (P.O. Box Number is Not Acceptable)	)		
PARRAMA CITT PL 02401				83					
			ļ.,				·		
			ľ	84	City		FL B5	Zip (	Code
11. Pursuani	to the provisions of Sections 607.050	2 and 607.1508, Florida Statut	es, the ab	ove-	named corpor	ration submits this statement for the pur		ging it	s registered
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					t signature required		DATE		
12.		AND DIRECTORS 13.			<del></del>	ADDITIONS/CHANGES TO OFFICE		CTOR hange	
TITLE	PD HARRISON,W.G.	☐ OELETE	1.1 TITL					ııarıQe	☐ Addition
NAME OTREET ADDRESS	4444 11544 4451 6555		1.2 NAN		DODES!				
STREET ADDRESS	PANAMA CITY FL				DDRESS				
CITY-ST-ZIP	VD VD	DELETE	1.4 CITY 2.1 TITE		ZIP	<del></del>		hange	Addition
NAME	KENNON, J. BRANCH		2.2 NAN						
STREET ADDRESS	1012 WEST 11TH STREET				DORESS				
CITY-ST-ZIP	PANAMA CITY FL		2. 4 CIT	Y-ST	- ZiP	•			
TITLE	\$	DELETE	3.1 TITL				□c	hange	Addition
NAME	KENNON, J. BRANCH		3.2 NAN	Æ					
STREET ADDRESS	1012 WEST 11TH STREET		3.3 STR	eet as	ddress	•			
CITY-ST-ZIP	PANAMA CITY FL		3.4. CIT	Y-51	- ZIP				
TITLE	T	☐ DELETE	4.1 TITL	E			□ c	nange	☐ Addition
NAME	HARRISON, W.G.		4. 2 NA	ME					
STREET ADDRESS			4.3 STR	EET A	DORESS				
CITY-ST-ZIP	PANAMA CITY FL		4.4 CITY		ZIP				1.446
TITLE	D UARROOM FRANKLIM R	☐ DELETE	5.1 TITE				□ c	าลกฎย	☐ Addition
NAME	HARRISON, FRANKLIN R.		5.2 NAN						
STREET ADDRESS	406 MAGNOLIA AVENUE				DDRESS				
CITY-ST-ZIP	PANAMA CITY FL	☐ DELETE	5.4 CITY		ZIP			nance	Addition
TITLE		□ nereig	6.1 TITLE					កោរបិន	AUUHIUH
NAME CTREET ADDRESS			6.2 NAME 6.3 STREET		DDDECC				
STREET ADDRESS									
CITY-ST-ZIP	and the that the information avanting to	ith this filing does not qualify fo	6.4 CITY			notice 119 07(3)/i) Florida Statutos I fur	that antifu th	ot the	information

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 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 trustipe 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 any address.

SIGNATURE:

1 Agresin

2/11/98 850-763-6782