ANNU	PROFIT PORATION IAL REPORT 1996		Score	ARTMENT OF a B. Mortham tary of State F CORPORATE					
DOCUN 1. Corporation	MENT # 64	14973	(0)						
PANA	MA CITY BOAT YAF	RD, INC.				E AN OMA OLIVA AVAIL AVER JOJA	F H ada Had Gode	OFON DION O	idin andır andır negi
Principal Place	of Business	Ma	iling Address	······································					
	TH LAGOON DRIVE SITY FL 32408		5129 NORTH LAGO PANAMA CITY FL S US			Date Incorporated or Qualifier	: 20 Day	-411	
			-			11/13/1979	1	of Last F 02/23/ 1	•
2. Principal Plai	ce of Business	2a.	Mailing Address			4. FEI Number 50,4050470			Applied For
Suite, Apt. #	, etc.		Suite, Apt. #, etc.			59-1950470 5. Certificate of Status Desired			Not Applicable Additional
City & State		27	Orty & State			6. Election Campaign Financing			Required
3		28		(Trust Fund Contribution			May Be d to Fees
Ζφ 4	Country 25	29	Zip	Gountry 30	/	B. This corporation has liability to Florida Statutes	or intangible ta es - [T] No	ix under s	199.032,
	9. Name and Address o		ered Agent		1	10. Name and Address of New		Agent	
MCCAI	ULEY, CARROLL L.			81	Name				
2503 E	AST THIRD ST.			82	Street Add	fress (P.O. Box Number is Not Accept	able)		
SPRINA	GFIELD FL 32401			[17-21			
O1 11111V	OF ILLD I C OLTO			83					
11. Pursuant to	the provisions of Sections f	507.0502 and 607	1505 Florida Statut	84	l í	values calculate this statement for those	FL		p Code
11. Pursuant to or registere familiar with SIGNATURE	the provisions of Sections f	e of Florigal Spon eof. Scobor 607.0	onanga was aumoriz 1505, Florida Statutes	84 es, the above ed by the con-	named corpo joration's bos	ration submits this statement for the pard of directors. Thereby accept the ap			
11. Pursuant to or registere familiar with SIGNATURE S	the provisions of Sections 6 d agent, or both, in the State, and accept the obligations grature, fixed or professional of the	e of Florigal Spon eof. Scobor 607.0	change was aumoriz 505, Florida Statutes 4134 de LORS	es, the above ed by the corp.	named corpo joration's bos	and of directors. Thereby accept the ap	ourpose of cha oppointment as DATE	inging its registered	egistered office Lagent, Lam PRS IN 12
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SIGNATURE:

SIGNATURE AND TYPED OR PAINTED NAME OF STORING OFFICER OR DIRECTOR

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