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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

CURRIE, WALTER HERMAN   12 NAME   2801 KINGSWOOD DRIVE   1.3 STREET ADDRESS	1	JAL REPORT 1997	Secretary DIVISION OF CO	of State	Secreta	ry of State
201 KINGSWOOD DRIVE PANAMA CITY FL 32405  201 KINGSWOOD DRIVE PANAMA CITY FL 32405  202	ii era prantina		3 (0)			
201 KNASHWOOD DRIVE   PANAMA CITY FL 32405 2019	Principal Plac	e of Busgess	Mailing Address			
11/14/1979   CAROV 1998   Applicable   App	2801 KINGSWOOD DRIVE 2801 KINGSWOOD DRIVE			19		
Note	<b>A</b> D	Bow of Discussion	the Mailine Address		11/14/1979	04/30/1996
Suite, Apr. II., etc.    Suite, Apr. II., etc.   Suite, Apr. II., etc.   Suite, Apr. II., etc.   Suite, Apr. II., etc.   Suite, Apr. II., etc.   Suite, Apr. III., etc.   S	·	nace of Business	} <sub>1</sub>		1	
Country   Zp   Country   Zp   Country   Zp   Country   Zp   Added to Fees   Trust Fund Contribution   Added to Fees   Regulated   Regula		#, etc	·			SR 75 Additional
28	22					Fee Required
Zep		re	<del> </del>			
10. Name and Address of Current Registered Agent   10. Name and Address of New Registered Agent   10. Name and Address (P.O. Box Number is Not Acceptable)   10. Name and New Registered Agent   10. Name and Address (P.O. Box Number is Not Acceptable)   10. Name and New Registered Agent   10. Name and Address (P.O. Box Number is Not Acceptable)   10. Name and Number   10. Name and Address (P.O. Box Number is Not Acceptable)   10. Name and Address   10. Name and Add		Country	·	Country	<del></del>	
CURRIE, WALTER HERMAN 8782 THOMAS DR. PANAMA CITY BEACH FL 32407  83  84 City FL 85 Zip Code  11. Disparation to the provisions of Sections 607 DBA2 and 607 1508, Florids Statutes.  12. The provisions of Sections 607 DBA2 and 607 1508, Florids Statutes be approximated by the purpose of changing its registered algorit, or both, in the State of Florids. Such change was authorized by the corporation subvilts this statement for the purpose of changing its registered algorit, or both, in the State of Florids. Such change was authorized by the corporation subvilts this statement for the purpose of changing its registered algorit, or both, in the State of Florids. Statutes.  SIGNATURE  12. OF FORT SAND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE  PO CURRIE, WALTER HERMAN  12 MAX  2801 KINGSWOOD DRIVE  PANAMA CITY FL  14 City ST-2P  14 City ST-2P  15 TITLE  20 MAX  2801 KINGSWOOD DRIVE  PANAMA CITY FL  14 City ST-2P  15 TITLE  20 MAX  30 SIRET ADDRESS  24 City ST-2P  16 TITLE  20 MAX  31 SIRET ADDRESS  24 City ST-2P  17 TITLE  20 CURRIE, SARA F  32 SIRET ADDRESS  34 CITY ST-2P  35 TITLE  3	24			30		
STORT CURRIE, WALTER HERMAN 280 I KINGSWOOD DRIVE PANAMA CITY FL  STO  CURRIE, SAP F  STO  DELETE  1.1 TITLE  STO  CURRIE, SAR F  22 Sirrel Address (P.O. Box Number is Not Acceptable)  82 Sirrel Address (P.O. Box Number is Not Acceptable)  83 Zip Code  84 City  FL  85 Zip Code  84 City  FL  85 Zip Code  84 City  FL  85 Zip Code  85 Zip Code  86 Zim Code  86 Zim Code  86 Zim Code  87 Zim Code  87 Zim Code  88 Zim Code  88 Zim Code  88 Zim Code  89 Zim Code  80 Zim Code			it Registered Agent	81 Name	10. Name and Address of New H	egistered Agent
PANAMA CITY BEACH FL 32407  ### City ### City #### City ####################################						
83				82 Street Add	fress (P.O. Box Number is Not Accepta	ible)
1. 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 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, 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 agent and accept the obligations of, Section 607.0505, Florida Statutes.    SIGNATURE	***	WHILE OF THE SERVICE		83		
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 agent, or boby, in the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent and accept the obligations of, Section 607 0505, Florida Statutes.  SIGNATURE  SIGNATURE  12.  OF I CERS AND DIRECTORS				84 City		85 Zip Code
office or registered agent, or both, in the State of Florina. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent a just himsian with and accept the obligations of Section 607, Section	44 ()	to the second Continue COT DEC	Ye and CO7 1500 Closide Chat do		neating a baits this statement for the	
SIGNATURE	office or i	to the provisions of Sections 607.050 registered agent, or both, in the State an familiar with, and accept the oblig	of Florida. Such change was au ations of, Section 607,0505, Flor	s, the above-hamed cor, uthorized by the corpora ida Statutes.	poration submits this statement for the attion's board of directors. I hereby acce	ept the appointment as registered
12.						
TITLE	10					
CURRIE, WALTER HERMAN   1.2 MAME   2801 KINGSWOOD DRIVE   1.3 STREET ADDRESS	L	,			ADDITIONS/OFFANGES TO OFF	
DELETE   14 CITY-ST-ZIP	NAM:	1		1,2 NAME		
DELETE   21 TITLE   21 TITLE   Change   Addition	STREET ADDRESS	2801 KINGSWOOD DRIVE		1.3 STREET ADDRESS		
NAME   CURRIE, SARA F   22 NAME   23 STREET ADDRESS   24 CITY - ST - ZIP   24 CITY - ST - ZIP   25 NAME   25 NAME   26 NAME   27 NAME   27 NAME   28 NAME		+ ···	Delete		· · · · · · · · · · · · · · · · · · ·	20 20 20 20 20 20 20 20 20 20 20 20 20 2
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DELETE   3.1 TITLE   3.2 NAME   3.2 NAME   3.3 STREET ADDRESS   3.4 CITY-ST-ZIP	1			<b>4</b> !		
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CHY-ST-ZP						
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STREET ADDRESS   4.3 STREET ADDRESS   4.4 CITY - ST - ZIP	}			1		
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STREET ADDRESS	ì		☐ DELETE	1		Change Addition
CTY+ST-ZIP						
TITLE DELETE 6.1 TITLE Change Addition  NAME 62 NAME						
			DELETE		<del></del>	☐ Change ☐ Addition
STREET ADDRESS 6.3 STREET ADDRESS	NAME			62 NAME		
	STREET ADDRESS			6.3 STREET ADDRESS		

64 CITY-S1-ZIP

14. I do 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 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 changed, or on an attachment with an address.

HENMAN CURRICE

**FILED** 

Apr 25 1997 8:00am

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