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

**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

666096

(3)

**FILED** Apr 23 1997 8:00am Secretary of State

The Committee of the second

	RUSS AND OLMSTEAD, IN		·····			
Principal Place of Business Mailing Address  307 W 5TH ST P O BOX 548 PANAMA CITY FL 32401  PANAMA CITY FL 32401  Mailing Address  307 W 5TH ST P O BOX 548 PANAMA CITY FL 32401-20						a Gibri grbit didit alası iddi
			32401-2607		3. Date Incorporated or Qualified 3a. C	Date of Last Report
					]	1/02/1996
2. Principal	Place of Business	2a. Mailing Addres	is		4. FEI Number	Applied For
21 26					59-1987801	Not Applicable
		Suite, Apt. #, el	pt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22 27 27 City & State City & State						Fee Required
23	tott:	28			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Count	у	8. This corporation has liability for intangible	
24	25	29	30		Florida Statutes	□ No
	9. Name and Address of Curr	ent Registered Agent			10. Name and Address of New Registered	Agent
	USS, CARL S		8	1 Name		
307 W 5TH ST			8:	2 Street Add	ress (P.O. Box Number is Not Acceptable)	
. P/	ANAMĂ CITY FL 32401		[   6:	3		
			8	4 City	FI	85 Zip Code
11. Pursuar office of agent 1	nt to the provisions of Sections 607.0 or registered agent, or both, in the Sta I am familiar with, and accept the obl	502 and 607.1508, Florida ite of Florida. Such change ligations of, Section 607.05	Statutes, the abo was authorized I 505, Florida Statut	ve-named corpora by the corpora es.	poration submits this statement for the purpose tion's board of directors. I hereby accept the ap	of changing its registered pointment as registered
SIGNATURE	Stg. enn. Typed or preced have of registered r	agent and title f applicable	INOTE: Registered A	pent signature requi	ired when reinstaling) DATE	
12.		AND DIRECTORS	13.	3	ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTORS IN 12
THLE	DP	DELE	TE 1.1 TITLE			Change Addition
NAME	RUSS, CARL S		1.2 NAMI	£ .		
STREET ADDRESS	1000 11001 10111 100111		1.3 STRE	ET ADDRESS		
Cily-SI-ZIP	PANAMA CITY, FL 00000	Dr. f	1.4 CITY			T Character T Laborator
10116	STV	DELE		į į		Change
NAME	OLMSTEAD, CHARLES M		2.2 NAMI			
STREET ADDRESS	2873 TUPELO DRIVE PANAMA CITY, FL 00000			ET ADDRESS		
CHY-ST-ZIP TELE	PANAMA CITT, FC 00000	☐ DELE	2. 4 CITY			Change Addition
NAME			3 2 NAM	- 1	, , , , A	
STREET ADORES	28			EY ADDRESS	1120 - 4/11	
CHY-ST 70			3 4. CITY	1	V above	
1-11.1		DELE			1,,0	Change Addition
NAME			4. 2 NAM	E ]	$\mathcal{N}$	
STREET ADDRES	58		4.3 STRE	ET ADDRESS		
CHY-S1-7P			4.4 CITY	-ST-ZIP		
101,8		☐ DEL€				Change Addition
NAME:			5.2 NAMI			
STREET ADDRESS	55			et address		
CITY ST ZIF		Dr.(	5.4 CITY			Addition Addition
THUE		☐ DELE	3	- 1	7000021544 -04/25/97010040 ***165.00	ICT AUDITOR
NAME	96		6.2 NAM	i	-04/25/5(010040	rue i
STREET ADDRES	15		6.3 STRE 6.4 CITY	ET ADDRESS	米米〒10つ。UU	
CITY-ST-7IP	reshy codily that the information supp	had with this filma does no			d in Section 119.07(3)(i) Florida Statutes, I furth	er certify that the

a do nareny certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this another report or supplied effect as if made under eath; that I am an officer or director of the proportation 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 12 if ghanging, or on an attachment with an address.

LCarl BE Russ President of Cor. 4-17-97 769-6179 **SIGNATURE** 

Daytime Phone #