

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morton
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 MAY -1 PM 2:33

DOCUMENT # 692553 (1)

1. Corporation Name
THE GOLDEN ANCHOR, INC.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
11800 WEST HIGHWAY 98-A
PANAMA CITY BEACH FL 32407

Mailing Address
11800 WEST HIGHWAY 98-A
PANAMA CITY BEACH FL 32407

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 06/12/1981
3a. Date of Last Report 02/21/1994

4. FET Number 59-2152223
Applied For Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees

8. This corporation has liability for unreported tax under 5-139.032, Florida Statutes Yes No

2. Principal Place of Business

2a. Mailing Address

21 State Apt # etc

26 Suite, Apt #, etc

22 City & State

27 City & State

23 Zip

24 Locality

28 Zip

30 Locality

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

JOHNSTON, JAMES P.
11800 WEST HIGHWAY 98-A
PANAMA CITY BEACH FL 32407

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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 607.1505, Florida Statutes.

SIGNATURE

James P. Johnston Pres.

4/30/95

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	PVD
NAME	JOHNSTON, JAMES P.
STREET ADDRESS	11800 WEST HIGHWAY 98-A
CITY, ST, ZIP	PANAMA CITY BCH FL
TITLE	STD
NAME	JOHNSTON, IRIS G.
STREET ADDRESS	11800 WEST HIGHWAY 98-A
CITY, ST, ZIP	PANAMA CITY BCH FL
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

11 NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12 STREET ADDRESS	
13 CITY, ST, ZIP	
14 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
15 NAME	
16 STREET ADDRESS	
17 CITY, ST, ZIP	
18 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
19 NAME	
20 STREET ADDRESS	
21 CITY, ST, ZIP	
22 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
23 NAME	
24 STREET ADDRESS	
25 CITY, ST, ZIP	
26 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
27 NAME	
28 STREET ADDRESS	
29 CITY, ST, ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(1)(b), Florida Statutes. I further certify that the information included 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, the recipient of this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 of this form. If changed, or on an alternate form, my address

SIGNATURE:

James P. Johnston

JAMES P. JOHNSTON

4/02/95

(904)234-8450