9. Name and Address of Current. Registered Agent     10. Name and Address of New Register; d Agent       BARTON, WALTER L. 9 INDUAN BAYOU DESTIN FL 32541     B1     Name       84     City     FL     85     Zip C ode       11. Pursuant to the provisions of Stations 607 050; and 607 1508, Florida Statutes, the above-nemed corporation subm ts this statement for the puroose of changing its registered agent, if an femiliar with, and a scept the obligations of. Section 607.0505, Florida Statutes.     84     City       SIGNATURE     Signature, topod r pursue, the obligations of Section 607.0505, Florida Statutes.     13.     ADDITI DNS/CHANGES TO OFFICERS AND DIRECTORS       12.     OFFICERS AND DIRECTORS     13.     ADDITI DNS/CHANGES TO OFFICERS AND DIRECTORS     13.       13. TITLE     OFFICERS AND DIRECTORS     13.     ADDITI DNS/CHANGES TO OFFICERS AND DIRECTO \$S IN 1       TITLE     VD     DELETE     1.1 TITLE     Change     Addee       STRET ADDRESS     211 WYNN HAVEN BCH. RD.     1.3 STRET ADDRESS     Change     Addee       STRET ADRESS     9 INDIAN BAYOU     23 STRET ADDRESS     Change     Addee       STRET ADRESS     9 INDIAN BAYOU     23 STRET ADDRESS     Change     Addee       STRET ADRESS     9 INDIAN BAYOU     23 STRET ADDRESS     Change     Addee       STRET ADRESS     9 INDIAN BAYOU     23 STRET ADDRESS     Change     Addee		PROFIT RPORATION JAL REPORT <b>1999</b>	RATION Katherine Harris REPORT Secretary of State		FILED Apr 27, 1999 8:00 am Secretary of State 04-27-1999 90042 028 ***150.00		
Principal Place of Business     Malling Address       P0. BOX 1985     DESTIN FL 22540       D0. NOT WRITE IN TH IS SPACE       2. Principal Place of Business     2a. Multing Address       3. Data is accomparing or Qualified       008/01/1981       2. Principal Place of Business     2a. Multing Address       3. Data is accomparing or Qualified       008/01/1981       2. Principal Place of Business     2a. Multing Address       3. Data is accomparing or Qualified       2a     2b       Suite, Apt. #, etc.       2a     2a       2b     City & State       2c     City & State       2a     2a       2b     Country       2c     Country       2a     2a       2b     Country       2c     2a       2b     2a       2c     2a       2c     2a       2a     2a       3b     Street A kidress of New Register d Agent       9     Name and Address of Scions 607 1505, Endda Status, the above-named corporation was the corporation above set eccrement year infraind and a set latered agent. In The Impartment with and a set latered agent. In The Impartment with and a set latered agent. In The Impartment with and a set latered agent. In The Impartment with and a set latered agent. In The Impartment with and a set latered agent. In The Impartment with an a se	<ol> <li>Corporation</li> </ol>	n Name					
2. Principal Place of Business       2a. Multing Address       4. FEIN.mber       Apriled Fo         2a1       2a2       2a3       Suite, Apt. #, etc.       City & State       City & State       State, Apt. #, etc.       State, Apt. #, etc. <t< th=""><th>185 STAHLMAN P.O. BOX 1585</th><th>AVENUE</th><th>P. O. BOX 1585 DESTIN FL 32540</th><th></th><th>DO NOT</th><th>WRITE IN THIS SPACE</th><th></th></t<>	185 STAHLMAN P.O. BOX 1585	AVENUE	P. O. BOX 1585 DESTIN FL 32540		DO NOT	WRITE IN THIS SPACE	
Suite, Apt. #, etc.       Suite, Apt. #, etc.       S. Certificate of Status Desired       \$8.75 A ratitional City & State         Image: State city & Stat		lace of Business			4. FEI Number		
City & State       City & State       6. Election Campaign Financing       \$5.00 May Be         Zip       Country       Zip       Country       8. This curportation owes the current year Intangible         Personal Property Tax.       Image and Address of Current Registered Agent       10. Name and Address of New Registerid Agent       No         9. Name and Address of Current Registered Agent       81       Name       10. Name and Address of New Registerid Agent         8 piNDIAN BAYOU       82       Street Aldress (P.O. Bo: Number is Not Acceptable)       83         84       City       83         84       City City       84       City City         9 inDian Bayou       84       City City       85         9 inDian Bayou       82       Street Aldress (P.O. Bo: Number is Not Acceptable)         84       City City       83         84       City City       84       City City         85       Statutes       84       City City       10. Name and Address of Coty City City City         86       Statutes       84       City City       11. City City City       11. City City City City         9 iNDIAN Bayou       Statutes       84       City City City City City City City City	Suite, Apt.	#, etc.	Suite, Apt. #, etc.			\$8.75	Aditional
Z4     Z5     Z9     Z0     Personal Property Tax.     Yes     No       9. Name and Address of Current Registered Agent     10. Name and Address of New Register'd Agent     10. Name and Address of New Register'd Agent       BARTON, WALTER L. 9 INDIAN BAYOU DESTIN FL 32541     81 Name       44     City     FL     85 Zip C ode       11. Pursuant to the provisions of S bottoms 607.050: and 607.1508, Florida Statutes, the above-name of or proteion subm is this statement for the purpose of changing its registered agent, or bith, in the State of Florida, Such change was authorized by the corporation subm is this statement for the purpose of changing its registered agent, or bith, in the State of Florida, Such change was authorized by the corporation's board of Jirectors. I hereby accept the ap iontiment as registered agent are istered for the obligations of, Section 607.0505, F orida Statutes.       SIGNATURE     VD     Its Registered Agent sphature reclined when remaining     DATE       12.     OFFICERS AN D DIRECTORS     13. ADDITI DNS/CHANGES TO OFFICERS AND DIRECTO IS IN 1       TITLE     VD     Its Registered Agent sphature reclined when remaining     DATE       13. TITLE     OFFICERS AN D DIRECTORS     13. ADDITI DNS/CHANGES TO OFFICERS AND DIRECTO IS IN 1       TITLE     VD     Its Registered Agent sphature reclined when remained the metadating     DATE       14.007+ST-2P     MARY ESTHER FL     13.000     Its Registered Agent sphature reclined when remained the formed agent and the fapilicable.     Its Registered Agent sp	City & 5 tat 23		28	Country	Trust Fund Contribution	Added	
BARTON, WALTER L. 9 INDIAN BAYOU DESTIN FL 32541  82 Street Aidress (P.O. Bo:: Number is Not Acceptable) 83 84 City EL 85 21 82 City EL 85 21 82 83 84 City EL 85 21 84 City EL 85 21 8 2 City EL 85 21 2 City EL 85 2 City EL	21p	25	29	·	Personal Property Tax.	Yes	
Signature, typed or printed nume of registered agen and title if applicable.         (NO E: Registered Agent signature reculted when reinstating         DATE           12.         OFFICERS AN D DIRECTORS         13.         ADDITI DNS/CHANGES TO OFFICERS         AND DIRECTO 3S IN 1           TITLE         VD         DELETE         1.1 TITLE         ADDITI DNS/CHANGES TO OFFICERS         AND DIRECTO 3S IN 1           NAME         GREENE, STEPHEN D         1.2 NAME         1.2 NAME         Change         Additional actional actionactional actional actional actionactional actional a	11. Pursuant	to the provisions of Sactions 607.0502	of Florida, Such change was a	84 City	rporation subm is this statement for tion's board of directors. I hereby a	the purpose of changing its	s registered
TITLE       VD       DELETE       1.1 TITLE       Change       Ad         NAME       GREENE, STEPHEN D       12 NAME       12 NAME       13 STREET ADDRESS       13 STREET ADDRESS       13 STREET ADDRESS       14 CITY-ST-ZIP						_	C RS IN 12
TITLE       VCD       DELETE       2.1 TITLE       Change       Ad         NAME       BARTON, WALTER L       2.2 NAME       2.3 STREET ADDRESS       CITY-ST-ZIP       Change       Ad         STREET ADDRESS       9 INDIAN BAYOU       2.3 STREET ADDRESS       CITY-ST-ZIP       DESTIN, FL 00000       2.4 CITY-ST-ZIP       Change       Ad         TITLE       PD       DELETE       3.1 TITLE       Change       Ad         NAME       BOWER, PETER T       3.1 TITLE       Change       Ad         STREET ADDRESS       222 SLEEPY OAKS ROAD       3.3 STREET ADDRESS       CITY-ST-ZIP       Change       Ad         STREET ADDRESS       222 SLEEPY OAKS ROAD       3.3 STREET ADDRESS       CITY-ST-ZIP       Change       Ad         ITTLE       DC       DELETE       3.4 CITY-ST-ZIP       Change       Ad         NAME       MCNAMARA, JOHN II       DELETE       4.1 TITLE       Change       Ad	NAME	Greene, stephen D 211 Wynn haven BCH. RD.	DELETE	1.2 NAME		[]] Change	
CITY-ST-ZIP     DESTIN, FL 00000     2.4 CITY-ST-ZIP       TITLE     PD     DELETE     3.1 TITLE     Change     Ad       NAME     BOWER, PETER T     3.2 NAME     3.2 NAME     STREET ADDRESS     CITY-ST-ZIP     Change     Ad       STREET ADDRESS     222 SLEEPY OAKS ROAD     3.3 STREET ADDRESS     CITY-ST-ZIP     Change     Ad       TITLE     DC     DELETE     4.1 TITLE     Change     Ad       NAME     MCNAMARA, JOHN II     4.2 NAME     Change     Ad	TITLE	VCD BARTON, WALTER L	DELETE	2.1 TITLE 2.2 NAME		[] Change	Addition
CITY-ST-ZIP         FT WALTON BCH FL         34 CITY-ST-ZIP           ITTLE         DC         DELETE         4.1 ITTLE           NAME         MCNAMARA, JOHN II         4.2 NAME	CITY-SJ-ZIP TITLE NAME	DESTIN, FL 00000 PD BOWER, PETER T		2. 4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME		Change	Addition
	CITY-ST-ZIP TITLE NAME	FT WALTON BCH FL DC MCNAMARA, JOHN II		3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME		Change	Addition
NAME 52 NAME	CITY-ST-ZIP			4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME		Change	Addition
5.4 CITY-ST-ZIP	NAME		DELETE	5.4 CITY- ST- ZIP 6.1 TITLE		Change	Addition
CITY-ST-ZIP  64 CITY-ST-ZIP  14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.C7(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplementa annual report is true and accurate and that my signature shall have the same legal effect as if made inder oath; that an an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chap er 607, Florida Statutes; and that my name appears in	NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME						