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Secretary of State

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NONPROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 701289

1. Corporation Name

THE FUN LOVERS, INC.

Principal Place of Business

Mailing Address

413 S. D STREET
 BENJAMIN E. SIMS
 PENSACOLA FL 32501

413 S. D STREET
 BENJAMIN E. SIMS
 PENSACOLA FL 32501



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21		26		08/10/1960	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number	
22		27		59-1801792	
City & State		City & State		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
23		28		6. Election Campaign Financing <input type="checkbox"/> \$5.00 May Be Added to Fees	
Zip		Country		Trust Fund Contribution	
24		25		29	
30		31		32	

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

LEWIS, MARTIN D
 413 SOUTH D STREET
 PENSACOLA FL 32501

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 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE

Martin D. Lewis

Martin D. Lewis

5/1/99

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D POE, DONALD	1.1 TITLE	D Deloris Curry
NAME	413 S D ST	1.2 NAME	413 S. D St.
STREET ADDRESS	PENSACOLA, FL 00000	1.3 STREET ADDRESS	Pensacola, Fla.
CITY-ST-ZIP		1.4 CITY-ST-ZIP	
TITLE	VP BROOKS, RAYMOND	2.1 TITLE	VP Frank Eggleston
NAME	413 S D ST	2.2 NAME	413 S D St.
STREET ADDRESS	PENSACOLA FL	2.3 STREET ADDRESS	Pensacola, Fla.
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	D POE, ROMONA	3.1 TITLE	D Raymon Brooks
NAME	413 S D ST	3.2 NAME	413 S D St.
STREET ADDRESS	PENSACOLA, FL 00000	3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	S BARRIOS, BETTY	4.1 TITLE	S Stella Hogan
NAME	413 S "D" STREET	4.2 NAME	413 S. D. St.
STREET ADDRESS	PENSACOLA, FL 00000	4.3 STREET ADDRESS	Pensacola, Fla.
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	P LEWIS, MARTIN	5.1 TITLE	
NAME	413 S D ST	5.2 NAME	
STREET ADDRESS	PENSACOLA FL 32501	5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	D GOODWIN, LOLA	6.1 TITLE	D Fritzgerald Johnson
NAME	413 S D ST	6.2 NAME	413 S D St.
STREET ADDRESS	PENSACOLA FL	6.3 STREET ADDRESS	Pensacola, Fla.
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Martin D. Lewis
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Martin D. Lewis

Date

5/1/99

Daytime Phone #

850 433-4427

CR2E037 (11/98)