FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

(4)

OITIZ O	ur Beach, incorporat	ED				
Principal Place of Business Ma		Mailing Address	Mailing Address			BI QIBIL BIBIL BIBIL BIBIL BIBIL BIBIL BIBIL IBBI
P O BOX 9642 PANAMA CITY BCH FL 32417		P O BOX 9842 PANAMA CITY BCH FL 32417-9642				
					3. Date Incorporated or Qualified 10/21/1970	3a. Date of Last Report 04/03/1996
	ace of Business	2a. Mailing Address			4. FEI Number 59-2934669	Applied For
Suite Apt #, etc.		Suite, Apt. #, etc.		38 2834008	Not Applicab	
22		27		5. Certificate of Status Desired	Fee Required	
City & State)	City & State			6. Election Campaign Financing	\$5.00 May Be
23		28			Trust Fund Contribution	Added to Fees
Ζφ	Country	Zip	Country		8. This corporation has liability for	
24	9. Name and Address of Curre	nt Registered Agent	[30]		Florida Statutes 10. Name and Address of New Re	Yes No
	S, Hallio and Address of Corre	in negleretes Agent	81	Name	10, tautio ara radiose of teat the	greated rights
COCAT H	OUSE JOHN		-			
GREAT HOUSE, JOHN 14006 BAY AVE			82 :	Street Addr	ess (P.O. Box Number is Not Acceptat	016)
PANAMA CITY BEACH FL 32413			83	······································		
			84	City		85 Zip Code
				,		FL []
 Pursuant to office or re 	o the provisions of Sections 617.056 agistered agent, or both, in the State	02 and 617.1508, Florida State of Florida Such change was	ites, the above-r authorized by the	named corp he corporat	oration submits this statement for the pion's board of directors. I hereby acce	ourpose of changing its registere of the appointment as registered
*	m familiar with, and accept the oblig	gations of, Section 617.0503, f	iorida Statutes.			
SIGNATURE _	Signature, typed ix printed name of registered ag	ent and title if applicable (NO	TE: Registered Agent	algnature requir	ed when reinstating)	DATE
12.	OFFICERS AN	ID DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC	
THILE	PD	DELETE				Change Addition
NAME	GREATHOUSE, JOHN		1.2 NAME]		
STREET ADDRESS	14006 BAY AVE		1.3 STREET AC			
CITY-ST-ZIP TITLE	PANAMA CITY BCH FL	DELETE	1.4 CITY-ST- 2.1 TITLE	ZIP		Change Addition
NAME	TAYLOR, FREDRICK M.	C Street	2.2 NAME			
STREET ADDRESS	14102 MILLCOLE AVE		2.3 STREET AL	DBESS		
CITY-ST-ZIP	ANAMA CITY BEACH FL		2.4 CITY-ST-	1		
TITLE	STD DELETE		3.1 TITLE			☐ Change ☐ Addition
NAME			3.2 NAME			
STREE1 ADDRESS	109 SEACLUSION DRIVE		3.3 STREET AT	DDRESS	-1	
CHTY - ST - ZIP	PANAMA CITY BCH FL	De est		ZIP		
TITLE	D	☐ DELETE	4.1 TITLE			Change Addition
NAME	LANGE, FRANK		4.2 NAME			
STREET ADDRESS	140 SEACLUSION DR PANAMA CITY BCH FL		4.3 STREET AL			
CITY+ST-ZIP TITLE	PANAMA CITT DON PL	DELETE	4.4 CITY-ST- 5.1 TITLE	ZIP		Change Addition
NAME		and occur	5.2 NAME			and arrestly for the
STREET ADDRESS			5.3 STREET AC	DDRESS		
4			5.4 CITY-SY-	ZIP		
CITY - S1 - ZIP		☐ DELETE	6.1 TITLE			☐ Change ☐ Addition
TITLE			6.2 NAME			
TITLE			6.3 STREET AL	ODRESS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	and the their terms.		6.4 CITY-ST-	ŽIP	In Contract (10 07/08) Florida Contract	A Liferithan and the standard
NAME STREET ADDRESS City-St-ZiP 14. I do horet: informatio	n indicated on this annual report or	supplemental annual report is	6.4 CITY-ST- lify for the exem true and accura	ZIP ption stated	i in Section 119.07(3)(i), Florida Statute my signature shall have the same legi t as required by Chapter 617, Florida S	al effect as if made under oath; th

SIGNATURE:

GNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

3:20.97

FILED

Mar 26 1997 8:00am .

Secretary of State

904233/592 Daytime Phone #0009873