FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

767783

(4)

1. Corporatio	ANDLE BOWHUNTER'S AS	(',		
Principal Place of Business Ma		Mailing Address		
8355 STANTON PL PENSACOLA FL 32526 US		B355 STANTON PL PENSACOLA FL 32526 US		3. Date Incorporated or Qualified 04/01/1983
00		03		4. FEI Number Applied For
9 Principal D	lace of Business	l On Mallin Addison		NOT APPLICABLE Not Applicable
21		2a. Mailing Address 26		5. Certificate of Status Desired \$8.75 Additional Fee Required
Suite, Apt	#, etc	Suite, Apt #, etc.		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
City & Stat	e	City & State		7. Is this nonprofit corporation a homeowners association?
Zip	Country	28		☐ Yes 🔽 No
24	25	Zip 29	Country 30	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes X No
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent				
			81 Name	
YOLA, PETTEY F 8355 STANTON PL			82 Street Ac	ddress (P.O. Box Number is Not Acceptable)
	COLA FL 32528		83	
			84 City	B5 Zip Code
<u> </u>				FL `
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 Signature, by educ product name of impostered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE				
12.		D DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TATLE	TD DETTEN YOUA'S	☐ DELETE	1.1 TITLE	Change Addition
NAME STREET ADDRESS	PETTEY, YOLA F 8355 STANTON PL		1.2 NAME	
CITY-ST-ZIP	PENSACOLA FL		1.3 STREET ADDRESS	
TITLE	VD	■ DELETE	1.4 CITY-ST-ZIP	VD Change 🐴 Addition
NAME	SMITH, DAVID			Beane, Larry R.
STREET ADDRESS	1462 WISHBONE ROAD		2 3 STREET ADDRESS	5677 Wickford Lane
CITY-ST-ZIP	CANTONMENT FL 32533			Pensacela, F1. 32526
TITLE	SD	DELETE	3.1 TITLE	Change Addition
NAME	STONE, LONNIE		3.2 NAME	
STREET ADDRESS	1165 CLYMILL DRIVE		3 3 STREET ADDRESS	
CITY-ST-ZIP	CANTONMENT FL 32533		3 4. CITY - ST - ZIP	
TITLE		☐ DELETE	4.1 TITLE	Change Addition
NAME			4. 2 NAME	
AID! AT TO			4.3 STREET ADDRESS	
CITY-ST-ZIP TITLE		DELETE	4.4 CITY - ST - ZIP 5.1 TITLE	☐ Change ☐ Addition
NAME		hand where the	5.2 NAME	□ overide □ vorition
STREET ADORESS			5.3 STREET ADDRESS	
CITY-ST-ZIP			5.4 CITY-ST-ZIP	
TIFLE		DELETE	6.1 TIFLE	☐ Change ☐ Addition
NAME			62 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	

14. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(r). 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 ori an attachment with an address.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY - ST - ZIP

Jola J. Retter

Yola F. Pettey

2/12/98

850-455-1062

FILED

Feb 18 1998 8:00am

Secretary of State