FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT #

835323

(7)

CENTER	FOR	DESIGN	Ы	ANNING

Principal Place of Business 200 E. MALLORY ST. PENSACOLA FL 32503 3. Date Incorporated or Qualified 11/03/1975 2. Principal Place of Business 2a. Mailing Address 2a. Mailing Address 2b. Suite, Apt. #, etc. 2c. Suite, Apt. #, etc. 2c. Suite, Apt. #, etc. 2d. Suite								1 18618/ 18188 11111 11116 11116				
PENSACOLA FL 32508 PENSACOLA FL 32503 PENSACOLA FL 32503 PENSACOLA FL 32503 3. Date Incorporated or Qualified 11/03/1975 4. FEI Number 23-7335895 5. Certificate of Status Desired 58/75 Addition Fee Required City 8 State 27/75 22	Principal Plac	ce of Business	Mailing Addre	ess				18810 18868 1810 8140 1414 14	16 IIII DIBII II		Fil Bibli dibli	
11/03/1975 02/08/1995 22 Mailing Address 2a. Mailing Add	2300 E. MALLORY ST. 2300 E. MALLORY ST.											
21 Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State 28 Country 29 Country 29 Suite, Apt. # etc. Suite, Apt. # etc. Sity & State City & State 28 Suite, Apt. # etc. City & State 29 Suite, Apt. # etc. Soite, Apt. #, etc. City & State City & State 29 Country 30 Suite, Apt. # etc. Soite, Apt. #, etc. Soite, Apt. #, etc. City & State City & State City & State 29 Country 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent MALT, HAROLD LEWIS 2300 E. MALLORY ST. PENSACOLA Ft. 32503 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 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 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, and accept the obligations of, Section 617.0503, Florida Statutes. SIGNATURE Signature, typed or prilled name of registered agent end title if applicable NOTE: Registered Agent signature required when reinstating) DATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES 10 OFFICERS AND DIRECTORS IN 12								 Date Incorporated or Qualified 11/03/1975 				
Suite, Apt. #, etc. Suite, Apt. #, etc. 27		Place of Business	<u> </u>	Idress							Applied Fo	 or
27 City & State City & State 28 Country 29 Country 29 State 29 State 9. Name and Address of Current Registered Agent MALT, HAROLD LEWIS 230 E. MALLORY ST. PENSACOLA FL 32503 81 City 82 Street Address (P.O. Box Number is Not Acceptable) 83 City 84 City 85 City 85 Zip Code 85 Zip Code 85 Zip Code 85 Tinis corporation has liability for intangible tax under s. 199.032. Florida Statutes 9. Name and Address of Current Registered Agent 9. Name and Address of New Registered Agent 85 City 86 City 87 FL 86 Zip Code 87 Zip Code 88 City 89 Street Address (P.O. Box Number is Not Acceptable) 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 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 a familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES 10 OFFICERS AND DIRECTORS IN 12		# etc						23-7335895			Not Applic	able
City & State Country Zip Country Zip Country Zip Signature typed or printed name of registered agent and title if applicable City & State City & State City & State Country Zip Country Zip Country Signature typed or printed name of registered agent and title if applicable City & State Country Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) Country 8. This corporation has liability for intangible tax under s. 199,032, Florida Statutes 10. Name and Address of New Registered Agent 10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 City FL 85 Zip Code 11. Pursuant to the provisions of Sections 617,0502 and 617,1508, Florida Statutes, the above-named corporation submilist his statement for the purpose of changing its registered 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 a signature typed or printed name of registered agent and title if applicable NOTE: Registered Agent signature required when refustating DATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES 10 OFFICERS AND DIRECTORS IN 12		· π, σ ιο.		#, etc.				5. Certificate of Status Desired				
Zip Country Zip Country B. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Tyes X No Pensacola Ft 32503 Pensa		te		te				6. Election Campaign Emancing			<u>·</u>	
24 25 29 30 S. Name and Address of Current Registered Agent 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent MALT, HAROLD LEWIS 2300 E. MALLORY ST. PENSACOLA FL 32503 83 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 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 are significant to the provisions of Section 617.0502 and 617.0503, Florida Statutes. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 12. OFFICERS AND DIRECTORS IN 12			·									
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent MALT, HAROLD LEWIS 2300 E. MALLORY ST. PENSACOLA FL 32503 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 Vip 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 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 amiliar with, and accept the obligations of, Section 617.0503, Florida Statutes. Signature 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 10 OFFICERS AND DIRECTORS IN 12	—	·			ıntry			8. This corporation has liability for	intangible t	ax under	s. 199.032,	
MALT, HAROLD LEWIS 2300 E. MALLORY ST. PENSACOLA FL 32503 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 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 as Signature. Typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	24			30				Florida Statutes	☐ Yes 🗷	No No		
MALT, HAROLD LEWIS 2300 E. MALLORY ST. PENSACOLA FL 32503 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 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 amiliar with, and accept the obligations of, Section 617.0503, Florida Statutes. Signature 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 10 OFFICERS AND DIRECTORS IN 12		5. Hans and Address	or content negistered Agei		81	Name		10. Name and Address of New	Registered	Agent		
2300 E. MALLORY ST. PENSACOLA FL 32503 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 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 as Signature. Typed or printed name of registered agent and title if applicable 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	MALT. H	HAROLD LEWIS										
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 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 are significantly submits this statement for the purpose of changing its registered agent. I are familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. SIGNATURE 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					82	Stree	t Addres	s (P.O. Box Number is Not Accepta	ole)			
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 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 ambiguillar with, and accept the obligations of, Section 617.0503, Florida Statutes. SIGNATURE Signature typed or printed name of registered agent and title if applicable INOTE: Registered Agent signature required when reinstating! DATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	PENSAC	COLA FL 32503			83			· · · · · · · · · · · · · · · · · · ·	 -			
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 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 amount of the purpose of changing its registered agent. I amount o					84	City			 	1001	 	
familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. SIGNATURE Signature: typed or printed name of registered agent and title if applicable OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	44 0				1 1	-			FL		•	
SIGNATURE 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	or registe familiar w	to the provisions of Section ered agent, or both, in the Si rith, and accept the obligation	is 617.0502 and 617.1508, Flor tate of Florida. Such change wa ons of, Section 617.0503, Florid	rida Statutes, the abo as authorized by the o la Statutes.	orpo	amed o	corporations board of	on submits this statement for the pu of directors. I hereby accept the app	rpose of cha cointment as	anging its registere	registered od agent. I a	office im
12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12												
THE VPO	12.				Agent	signature	required wh				· · · · · · · · · · · · · · · · · · ·	
		VPD		F: -5-	TI F		1	ADDITIONS/CHANGES TO OF				
NAME MALT, CAROL 1.2 NAME	NAME	MALT, CAROL								Unange	Addit	.1011
STREET ADDRESS 2300 E MALLORY ST 1.3 STREET ADDRESS	STREET ADDRESS	2300 E MALLORY S	T			ADDRESS						
CITY-ST-ZIP PENSACOLA FL 14 CITY-ST-ZIP	CITY-ST-ZIP											
TILE PD DELETE 21 TITLE Dehance Addit	TITLE									Change	☐ Addit	tion
NAME MALT, HAROLD LEWIS 22 NAME	NAME			2.2 N/	AME							
STREET ADDRESS 2300 E. MALLORY ST. 2.3 STREET ADDRESS	STREET ADDRESS		ST.	2.3 \$1	REET	ADDRESS	1					
CITY-ST-ZIP PENSACOLA FL 2.4 CITY-ST-ZIP				2.4C	ITY-S	T-ZIP						
TITLE SD Change Addition Addit			1240	ELETE 3.1 71	TLE				1	Change	Addit	.ion
NAME NAOS, BARBARA R STREET ADDRESS 1510 HOLLINS ST 3.3 STREET ADDRESS 3.3 STREET ADDRESS												
PATTIMORE ND 00000			000									
TIDE VPD						T-ZIP	-			-		
NAME MALT, CAROL 4.1 TITLE Change Addition			ال ال						l	unange	∐ Additi	ion
STREET ADDRESS 2300 E MALLORY ST 4.3 STREET ADDRESS 4.3 STREET ADDRESS		, -	Т			TUUBEGG						
CITY-ST-ZIP PENSACOLA FL 44 CITY-ST-ZIP	CITY - ST - ZIP	PENSACOLA FL					1					
TITLE DELETE 5.1 TITLE DELATE Addition	TITLE		D			4.11	· · · · ·			Change	Fibba [7]	ion
NAME 5.2 NAME	NAME			5.2 NA	ME							
STREET ADDRESS 5.3 STREET ADDRESS	STREET ADDRESS			5.3 ST	REELA	ADORESS						
City-St-ZiP 5.4 City-St-ZiP					<u> </u>	- ZIP						ì
TITLE DELETE 6.1 TITLE Change Addition				LETE 6.1 TIT	LE				[Change	Additi	ion
NAME 62 NAME				5.2 NA	ME							
STREET ADDRESS 63 STREET ADDRESS	i			63 ST	REET A	ODRESS						İ
CITY-ST-ZIP 6.4 CITY-ST-ZIP 6.4 CITY-ST-ZIP		ov certify that the information	supplied with this files is	6.4 CII	Y-ST	- ZIP	-114 2)	
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(3)(k), 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 und appears in Block, 12 or Block, 12 or Block, 13 if changed, or on an attachment with an address.		I am an officer or director of	f the corporation or the receiver									

SIGNATURE: LAW LAME HAROW USWIS MAY 2, 27, 96 904 4 37,8478
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Disjune Priorie #