FILED Apr 30, 1999 8:00 am Secretary of State

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## \_\_FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1999



Mailing Address

FLORIDA DEPARTMENT OF STATE.

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # 853069

Principal Place of Business

ALABAMA LANDMARK CORPORATION OF FLORIDA

104 SOUTH MAIN STREET ENTERPRISE AL 36330-2543		NOW SOMEN WANK SUBERT FUTERINGEN AF 1980-1984			DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified
					06/04/1982
2. Principal P	lace of Business	2a. Mailing Address	→ D O Dow 211424		4. FEI Number Applied For
21		120	120		63-0850822 Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	<b>—</b>		5. Certificate of Status Desired Fee Required
22		City & State	City & State		
City & State		— <u> </u>	¬ ´		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
23   Zip	Country	28 Enterprise	Country	1	8. This corporation owes the current year Intangible
<b>-</b>	25	<sup>29</sup> 36330 <sub>30</sub>	n ř		Personal Property Tax.
24	9. Name and Address of Curre	[25]	'1		10. Name and Address of New Registered Agent
	3. Hallo alla Addicas al Salita	The grown of the same of the s	81	Nam	
LEE.	, T. E.			<u> </u>	
	31 PANAMA CITY		82 Street A		et Address (P.O. Box Number is Not Acceptable)
PAN	AMA CITY FL 32413		83		
			84	City	FI 85 Zip Code
Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.  SIGNATURE    Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE					
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PD .	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	LEE, T. E.		1.2 NAME		
STREET ADDRESS	104 S. MAIN STREET		1.3 STREET		SS
C/TY-ST-ZIP	ENTERPRISE AL	Deter	1.4 CITY-S	T-ZIP	Change Ft Addition
TITLE		DELETE	2.1 TITLE		Vice President ☐ Change ☐ X Addition
NAME	٠,		2.2 NAME		William Del Lee
STREET ADDRESS			2.3 STREET		1 1990 Panama City Den Frwy
CITY-ST-ZIP	<u> </u>	☐ DELETE	2. 4 CITY-5	ST- ZIP	Panama City Bch, FL 32413
TITLE		□ pere⊥e	3.1 TITLE		Secretary ☐ Change ☑ Addition J. E. Sawyer, Jr.
NAME			.3.2 NAME		`  TP 0 Pov 115_110 F Collaba
STREET ADDRESS			3.3 STREET		Enterprise, AL 36330
CITY-ST-ZIP		☐ DELETE	3.4. CITY-S 4.1 TITLE	51-ZIP	Change Addition
TITLE		_ occere	4. 2 NAME		
NAME			4.3 STREE	YANNDES	22
STREET ADDRESS			4.4 CITY-S		~
CITY-ST-ZIP TITLE		DELETE	5.1 TITLE	1-21	☐ Change ☐ Addition
NAME		_	5.2 NAME		_ ', _
STREET ADDRESS			5.3 STREE	TADORES	ss
CITY-ST-ZIP			5.4 CITY- S	T-ZIP	
TITLE	10-11	☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
			63 STREET	TADORES	ss

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 607, 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.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP