Feb 20, 1999 8:00 am Secretary of State

02-20-1999 90076 009 ***150.00

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # G15058

1. Corporation SANDY	CREEK AIRPARK, INC.	•			: (48)(()) 884/ ((884 A)()) 884/3/ A)((0) (48)) 6((0)) 4((0))		
Principal Place of Business Mailing Address						<u> </u>	
•							
12908 AIR WAY ST PANAMA CITY FL 32404-2833 PANAMA CITY FL 32404-2833							
US		US			DO NOT WRITE IN THIS SP	ACE	
					3. Date Incorporated or Qualifed 12/27/1982		
2. Principal Place of Business 2a. Mailing Address				4. FEI Number	Applied For	\neg	
21 26				59-2264822	Not Applicat	ole	
Suite, Apt. #, etc. Suite, Apt. #, etc.					5. Certifcate of Status Desired	8.75 Additional	
27 27 City & State City & State					·	Fee Required	_
23		28			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip 24	Country 25	Zip 29	Country 30		This corporation owes the current year Intang Personal Property Tax.	izie Yes ⊟No	
	9. Name and Address of Curren				10. Name and Address of New Registered Age	nt	一
۷OI	ING, JUDITH C		81	Name		•	П
12908 AIR WAY STREET			82	Street Add	ress (P.O. Box Number is Not Acceptable)		_
PAN	AMA CITY FL 32404-2833		83	•			
			84	City	lo	E Zin Codo	
					₽ Ĺ.	5 Zip Code	ĺ
office of i	to the provisions of Sections 607.050; registered agent, or both, in the State im familiar with, and accept the obligations.	of Florida. Such change was au	thorized by	the corporation	poration submits this statement for the purpose of cha on's board of directors. I hereby accept the appointment	nging its registered ant as registered	1
SIGNATURE						•	}
Signature, typed or printed name of registered agent and title if applicable. (NOTE R 12. OFFICERS AND DIRECTORS			Registered Agen	jistered Agent signature required when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN		DECTODE BLAC	
TITLE	PD	DELETE	1.1 TITLE			Change Addit	$\overline{}$
NAME	YOUNG, DAVID F.		1.2 NAME		_		
STREET ADDRESS	12908 AIR WAY ST		1.3 STREET	ADDRESS	•		
CITY-ST-ZIP	PANAMA CITY FL 32404-2833		1.4 CITY-ST				
TITLE	VT	☐ DELETE	2.1 TITLE			Change	tion
NAME	HUGHEY, BONNIE J.		2.2 NAME		_	• –	
STREET ADDRESS	4040E C DIVIE 1840/ B400		2.3 STREET	ADDRESS			- {
CITY-ST-ZIP	MIAMI FL 33157		2.4 CITY-S	T- ZIP	,		- 1
TITLE	VS	☐ DELETE	3.1 TITLE			Change Additi	ion
NAME	YOUNG, JUDITH C		3.2 NAME				Ì
STREET ADDRESS			3.3 STREET	ADDRESS			- {
CITY-ST-ZIP	PANAMA CITY FL 32404-2833		3.4. CITY-S1	r-ZiP			- 1
TITLE		☐ DELETE	4.1 TITLE			Change	ion
NAME			4. 2 NAME				
STREET ADDRESS			4.3 STREET	ADDRESS			ļ
CITY-ST-ZIP	· · · · · · · · · · · · · · · · · · ·		4.4 CITY-ST	-ZIP	Venne		_
TITLE			5.1 TITLE	}		Change	ion
NAME			5.2 NAME	ADDOCES:	•		
STREET ADDRESS			5.3 STREET				
CITY-ST-ZIP TITLE		□ DELETE	5.4 CITY-ST- 6.1 TITLE	- 211		Channe Taking	
NAME			6.2 NAME			Change	On
STREET ADDRESS			6.3 STREET	ADDRESS			1

14. I hereby certify that the information supplied with this filling 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 trusted 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 providing address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

(850)871-2911