

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

FILED
Sep 17 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT #	G52119	(6)
1. Corporation Name	LSLT CHURCHWELL, INCORPORATED	
Ammended		

Principal Place of Business	Mailing Address
6608 E. HWY. 22 PANAMA CITY FL 32404	6608 E. HWY. 22 PANAMA CITY FL 32404

DO NOT WRITE IN THIS SPACE	
3. Date Incorporated or Qualified	07/29/1983

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
24 Country	29 Country

4. FEI Number	Applied For
59-2304978	Not Applicable
5. Certificate of Status Desired	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.	Yes No

9. Name and Address of Current Registered Agent	
CHURCHWELL, LARRY J. 2541 FEROL LANE LYNNHAVEN FL 3244	
81 Name	82 Street Address (P.O. Box Number Is Not Acceptable)
83	84 City
85	86 Zip Code

10. Name and Address of New Registered Agent	
81 Name	82 Street Address (P.O. Box Number Is Not Acceptable)
83	84 City
85	86 Zip Code

11. 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS	
TITLE	NAME
NAME	CHURCHWELL, LARRY
STREET ADDRESS	2541 FEROL LANE
CITY-ST-ZIP	LYNN HAVEN FL
TITLE	NAME
NAME	CHURCHWELL, SHARON L
STREET ADDRESS	2541 FEROL LANE
CITY-ST-ZIP	LYNN HAVEN FL
TITLE	NAME
NAME	ALLEN, BILL
STREET ADDRESS	410 S PAL ALTO AVE.
CITY-ST-ZIP	PANAMA CITY FL 32401
TITLE	NAME
NAME	CHURCHWELL, DON
STREET ADDRESS	6608 E HWY 22
CITY-ST-ZIP	PANAMA CITY FL 32401
TITLE	NAME
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	NAME
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	Change Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	Change Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	Change Addition
3.2 NAME	Allen, Bill
3.3 STREET ADDRESS	410 S. Palo Alto Ave.
3.4 CITY-ST-ZIP	Panama City, FL 32401
4.1 TITLE	Change Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	Change Addition
5.2 NAME	Dauphin, Monte
5.3 STREET ADDRESS	2036 Orlando Road
5.4 CITY-ST-ZIP	Panama City, FL 32405
6.1 TITLE	Change Addition
6.2 NAME	7000002644037
6.3 STREET ADDRESS	-03/21/98--01005--012
6.4 CITY-ST-ZIP	***61.25

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.

SIGNATURE: Sharon Churchwell V. pres. 9/8/98 8508710953
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (10/97)