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

**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # G82749

(4)

DANIEL	. & KOMAREK, CHARTE	RED							
Principal Plac	ce of Business	Mailing Address							
% JOHN F. D. 315 E. FOURT PANAMA CITY	TH ST	% John F. Daniel 315 E. Fourth St Panama City Fl 32401-3							
						3. Date Incorporated or Qualified	1	of Last Re	port
2. Principal 9	Place of Business	2a. Mailing Address			····	<b>02/01/1984</b> 4. FEI Number	1 01/20	5/1996	plied For
21	THE COLUMN TOO	26				59-2363095		<del></del>	t Applicable
Suite Apt.	. #, etc	Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 Additional		
22		27	4			Fee Required			
City & Stat	te	City & State				6. Election Campaign Financing	m	\$5.00	
23	Country	28	Cour		······································	Trust Fund Contribution	<u> </u>	Added to	
Zip 24]	· · · · · · · · · · · · · · · · · · ·	Country Zip 29 30		iti y		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes			
24	9, Name and Address of C		1301			10. Name and Address of New Reg			
אַת	NIEL, JOHN F.			61	Name		<del>en en e</del>		
	S E. FOURTH ST		82 Street Add			ss (P.O. Box Number is Not Acceptab	<u> </u>		
	NAMA CITY FL 32401		.	اء"	Slied Addie	oress (F.O. Box Number is Not Acceptable)			
			Г	63					
			-	84	City		T	<b>85</b> Zip C	code:
					,	oration submits this statement for the p	FL		
office or agent. I a SIGNATURE	am familiar with, and accept the Service types or providing ic of legisle	obligations of, Section 607.0505, Flo	orida Statu	utes	r the corporations.  ant signature require	on's board of directors. I hereby accepts swhen reinstailing) ADDITIONS/CHANGES TO OFFIC	DATE		
111LE	D	DELETE	1,1 TiT	ı F		ADDITIONS/OFFACES TO OFFICE		Change	Addition
NAME	DANIEL, JOHN F.		1.2 NA						
STREET ADDRESS	315 E. FOURTH ST			1.3 STREET ADDRESS					
C(TY - ST - Z)P	PANAMA CITY FL		1.4 CIT	Y-5	T - <b>Z</b> IP				
TITLE	D	DELETE	ETE 2.1 TITLE			*****		Change	☐ Addition
NAME	KOMAREK, PAUL G.		2.2 NA	ME					
STREET ADDRESS	315 E. FOURTH ST		2.3 STF	REET	ADDRESS				
CITY-S1-ZIP	PANAMA CITY FL		2, 4 CI		ST - ZIP			<del></del>	
1111.6		☐ DELETE	3.1 TIT			•	L	J Change	Addition
NAME			3.2 NA						
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP TITLE		DELETE	3.4. CI 4.1 TIT		\$1 - ZIP	<del> </del>		Change	Addition
NAME			4.1111 4.2 NA				_	_ Change	
STREET ADDRESS			4		ADDRESS				
CHY-ST-ZIP			4.4 CIT						
THLE		DELETE	5.1 TIT		·····			Change	Addition
NAME			5.2 NA	ME					
STREET ADDRESS			5.3 ST	REET	ADDRESS				
City-S1-ZiP	L		5.4 CIT	IY-S	ST-ZIP				
TITLE				6.1 TITLE				Change	Addition
NAME			6.2 NA	ME					
STREET ADDRESS			6.3 ST	REET	ADDRESS				
CITY - ST - ZiF			64 CIT				<del></del>	<del></del>	<del></del>
14. I do here informati Lami an e appears	eby certify that the information story indicated on this annual repo officer or director of the corporation Block 12 or Block 13 if the corporation of the corporation beautiful to the corporation beautiful to the corporation beautiful to the corporation of the	upplied with this filing does not quali ort or supplemental annual report is lition or the receiver or trustee empor ged, or on an attachment with an ad	ity for the true and a wered to e dress.	Xec	proption stated urate and that i cute this report	in Section 119.07(3)(i), Florida Statute my signature shall have the same lega as required by Chapter 607, Florida S	<ol> <li>I turther of l effect as if tatutes; and</li> </ol>	ertily that i made und that my n	tne der oath; that lame

NATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

904-763-65 Dayline Phone #

**FILED** 

Feb 06 1997 8:00am

Secretary of State

**SIGNATURE:**