

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JUN 13 AM 10:15

DOCUMENT # **H31326** (2)

1. Corporation Name
BAYSHORE GARDENS OF DESTIN, INC.

Principal Place of Business Mailing Address
20001-A EMERALD COAST PARKWAY **20001-A EMERALD COAST PARKWAY**
DESTIN FL 32541 **DESTIN FL 32541**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 3a. Date of Last Report
11/26/1984 **04/15/1994**

2. Principal Place of Business 2a. Mailing Address
21 26
Suite, Apt. #, etc. Suite, Apt. #, etc.
22 27
City & State City & State
23 28
Zip Zip Country Country
24 25 29 30

4. FEI Number Applied For
59-2503187 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 has liability for intangible tax under s. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent
RAHMES JR., GORDON R.
1813 JOHN SIMS PKWY,
NICEVILLE FL 32578

10. Name and Address of New Registered Agent
81 Name **W. Wade Wallace**
82 Street Address (P.O. Box Number is Not Acceptable) **5160 Hwy 90 East, Suite 26**
83
84 City **Destin** FL 85 Zip Code **32541**

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 *Wade Wallace*

4/8/95

12. OFFICERS AND DIRECTORS
TITLE **PSTD**
NAME **KROEGER, CHESTER G.**
STREET ADDRESS **20001-A EMERALD COAST**
CITY ST ZIP **DESTIN FL**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
11 TITLE Change Addition
12 NAME
13 STREET ADDRESS
14 CITY ST ZIP
21 TITLE Change Addition
22 NAME
23 STREET ADDRESS
24 CITY ST ZIP
31 TITLE Change Addition
32 NAME
33 STREET ADDRESS
34 CITY ST ZIP
41 TITLE Change Addition
42 NAME
43 STREET ADDRESS
44 CITY ST ZIP
51 TITLE Change Addition
52 NAME
53 STREET ADDRESS
54 CITY ST ZIP
61 TITLE Change Addition
62 NAME
63 STREET ADDRESS
64 CITY ST ZIP

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 110.07(3)(b), 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: *Wade Wallace*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/6/95 (904) 654-1544