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

**PROFIT** CORPORATION **ANNUAL REPORT** 

1997



## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # H91074

(5)

**FILED** Jun 06 1997 8:00am Secretary of State

Principal Place of Business  PANAMA CITY MARINA PIER 8 SUP 24 PANAMA CITY FL \$2401-2426  PANAMA CITY FL \$2401-2426  PANAMA CITY FL \$2401-2426									
US					3. Date Incorporated or Qualified 3a. Date of Last F			Report	
6 Diesis I	Was at Durch	1 6- 14-17	N = 444		A Completed at 11	12/20/1985	05/	01/1996	
2. Principal P	lace of Business	28. Mailing Address 5	Address ST, PANAMA CAYBOLL TO BE TO			4. FET Number 59-2635390		<u> </u>	oplied For of Applicable
Suite, Apt.	#, etc.	Suile, Apr. #, etc.		10	<u> </u>	5. Certificate of Status Desired		\$8.75	Additional
22		27							guired
City & Stat	e	City & State				6. Election Campaign Financing Trust Fund Contribution	Г~1		May Be
Zip	Country	Zip	Cou	ntry		8. This corporation has liability for i	ntanaible.		to Fees
24	25	29	30	,			Yes [		. 199.032,
<del>=/ </del>	9. Name and Address of Curren		_ 1 = - 1			10. Name and Address of New Re			
MCLENDON, JERRY				81	Name				
	5 LAIRD STREET		ŀ	82	Street Addres	ss (P.O. Box Number is Not Acceptab	le)	····-	
PAN	NAMA CITY BCH FL 32408		Į				· 	<del></del>	
				В3		4			
			ŀ	84	City			<b>85</b> Zip	Code
				L			FL		
agent. I a SIGNATURE	im familiar with, and accept the obligation of registered ago				signature requires	ration submits this statement for the p on's board of directors. I hereby accept Laher reinstating)	DATE		
12.	OFFICERS ANI		13.			ADDITIONS/CHANGES TO OFFIC	ERS AND		
TITLE	POT	☐ DELETE						Change	Addition
NAME	PEREZ, GEORGE		1.2 NA	-					
STREET ADDRESS	121 WALNUT DRIVE				DORESS				
CITY-ST-ZIP	ENTERPRISE AL 36360	DELETE		17-51-	ZIP			Change	Addition
TITLE	VDS	LJ DELEGE	21 111					☐ Change	L ACCHION
NAME	ADAMS, R.C. (ROY)		2 2 NA						
STREET ADDRESS	218 MEADOW LAKE DRIVE				DDRESS				
CITY-ST-ZIP TITLE	OZARK AL 36360			2. 4 CITY - ST - ZIP 3.1 TITLE				Change	Addition
NAME		- otten	3.2 N/		)			counge	L MOUNT
STREET ADDRESS					ODRESS				
CITY-ST-ZIP				TY-ST-					
TITLE		DELETE	4.1 TiT		**			Change	Addition
NAME		<del></del>	4. 2 N/		Ì				
STREET ADORESS					DORESS				
CITY-ST-ZIP				IY-S1-					
TITLE	· · · · · · · · · · · · · · · · · · ·	☐ DELETE	5.1 111				• • • • • • • • • • • • • • • • • • • •	Change	Addition
NAME	•		5.2 NA	ME					
STREET ADDRESS			5.3 S1	REFT AC	DDRESS				
CITY-ST-ZIP			5.4 CI	TY-ST-	ZIP				
TITLE		DELETE	6.1 TIJ	LE				Change	Addition
NAME	I .		6.2 NA	ME		•			
STREET ADDRESS	10		6.3 S1	REET A	ODRESS				
CITY-ST-ZIP			6.4 Cil	IY-\$1-	ZIP				

I do 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.

7711/97 /734/724-34B7