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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Mar 10 1997 8:00am

Secretary of State

3/06/97 904-871-3746

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # J19953

(5)

MARWILL, INC.

		,		
Principal Place of Business William A. TAYLOR 1202 S. COMET AVE. PANAMA CITY FL 32404		Mailing Address % WILLIAM A. TAYLOR 1202 S. COMET AVE. PANAMA CITY FL 32404-9623		
				3. Date Incorporated or Qualified 3a. Date of Last Report 06/16/1986 04/03/1996
~~~ <u>`</u>	ace of Business	2a. Mailing Address	**************************************	4. FEI Number Applied For
21 Suite, Apt	#. etc	Suite, Apt. #, etc.		59-2691909   Not Applicable
22		27		5. Certificate of Status Desired Fee Required
City & State	9	City & State		Election Campaign Financing \$5.00 May Be
<b>23</b> Ζιμ	Country	<b>28</b>	Country	Trust Fund Contribution
24	25	29	30	8. This corporation has liability for intangible tax under s. 199 032, Florida Statutes
	9, Name and Address of Curre			10. Name and Address of New Registered Agent
	LOR, WILLIAM A.		81 Nam	ne
	2 S. COMET AVE.		82 Stree	et Address (P.O. Box Number is Not Acceptable)
PAN	IAMA CITY FL 32404		83	
			84 City	Inc. 70 Code
			City	FL 85 Zip Code
agent La S'GNATURE	m familiar with, and accept the oblig	pations of, Section 607.0505, F	lorida Statutes. TE Registered Agent signat	orporation's board of directors. I hereby accept the appointment as registered   DATE  DATE
12.		ID DIRECTORS  DELETE	13,	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Change Addition
NAME	DP Taylor, William A.	L) DECEIE	1.1 TITLE 1.2 NAME	Change Addition
STREET ADDRESS	1202 S. COMET AVE.		1.3 STREET ADDRESS	s
COY-\$1-7IP	PANAMA CITY FL		1.4 CITY-ST-ZIP	
THILF	D	☐ DELETE	2.1 TITLE	Change Addition
MAME COULD ADDOUGH	TAYLOR, MARIE S. 1202 S. COMET AVE.		2.2 NAME	
STREET ADDRESS CHY_ST-ZIP	PANAMA CITY FL		2.3 STREET ADDRESS 2. 4 CITY - ST - ZIP	5
Tillië		☐ DELETE	3 1 TITLE	Change Addition
NAME:			3 2 NAME	
STREET ADDRESS			3.3 STREET ADDRESS	S
CHY-SE 202 TilleE	*	DELETE	3.4. CITY - ST - ZIP 4.1 TITLE	Change Addition
NAME		L.J. DECCIE	4.2 NAME	La Change La Audition
STREET ADDPLISS			4.3 STREET ADDRESS	s
CHY-S1-ZIP			4.4 CITY-ST-ZIP	
101.F		DELETE	5.1 TITLE	Change Addition
NAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	S
TITLE		DELETE	5.4 CITY+ST-ZIP 6.1 TITLE	Change Addition
NAM?		<del></del>	6.2 NAME	Land 1 World I
STREET ADDRESS			6.3 STREET ADDRESS	s
CITY - ST - ZIP	······································		6.4 CITY - ST - ZIP	
eiformatio Fam an ol	is indicated on this annual report or a	supplemental annual report is r the receiver or trustee empor	true and accurate an wered to execute this	n stated in Section 119.07(3)(i), Florida Statutes. I further certify that the nd that my signature shall have the same legal effect as if made under oath; that s report as required by Chapter 607, Florida Statutes; and that my name