FILE NOW: FILING FEE AFTER MAY 1 IS $550.00

FILED
Apr 14 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT
1997

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

DOCUMENT # **J23161** **(9)**

1. Corporation Name
OCEAN OPRY, INC.

Principal Place of Business	Mailing Address
8400 FRONT BCH RD PANAMA CITY BEACH FL 32407 US	8400 FRONT BCH RD PANAMA CITY BEACH FL 32407-4827 US

3. Date Incorporated or Qualified: **07/09/1986**
3a. Date of Last Report: **05/01/1996**

2. Principal Place of Business — 21
Suite, Apt. #, etc. — 22
City & State — 23
Zip — 24 Country — 25

2a. Mailing Address — 26
Suite, Apt. #, etc. — 27
City & State — 28
Zip — 29 Country — 30

4. FEI Number: **59-2719139** ☐ Applied For ☐ 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

HESS, GLENN L.
9108 FRONT BEACH RD
PANAMA CITY BEACH FL 32407

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent's signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	☐ DELETE	1.1 TITLE	V. Vice President	☐ Change ☒ Addition
NAME	RADER, WAYNE		1.2 NAME	CLANTON, Deborah	
STREET ADDRESS	6209 N. LAGOON DR.		1.3 STREET ADDRESS	3615 Courtney Dr.	
CITY-ST-ZIP	PANAMA CITY BCH FL		1.4 CITY-ST-ZIP	Panama City Fla 32404	
TITLE	V	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	RADER, BILL		2.2 NAME		
STREET ADDRESS	3640 COURTNEY		2.3 STREET ADDRESS		
CITY-ST-ZIP	PANAMA CITY BCH. FL		2.4 CITY-ST-ZIP		
TITLE	V	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	RADER, DENNIS		3.2 NAME		
STREET ADDRESS	3644 COURTNEY DRIVE		3.3 STREET ADDRESS		
CITY-ST-ZIP	PANAMA CITY BCH. FL		3.4 CITY-ST-ZIP		
TITLE	TS	☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME	RADER, PATSY		4.2 NAME		
STREET ADDRESS	6209 N.LAGOON DR.		4.3 STREET ADDRESS		
CITY-ST-ZIP	PANAMA CITY BCH. FL		4.4 CITY-ST-ZIP		
TITLE	V	☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME	RADER, REBECCA		5.2 NAME		
STREET ADDRESS	3640 COURTNEY DR		5.3 STREET ADDRESS		
CITY-ST-ZIP	PANAMA CITY BCH. FL		5.4 CITY-ST-ZIP		
TITLE	V	☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME	RADER, CARLA		6.2 NAME		
STREET ADDRESS	3644 COURTNEY DR.		6.3 STREET ADDRESS		
CITY-ST-ZIP	PANAMA CITY BCH. FL		6.4 CITY-ST-ZIP		

(96/6) CR2E036

14. 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.

SIGNATURE: Wayne W Rader Wayne W Rader 3-22-97 904-234-5464