FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00					FILED		
CORPORATION ANNUAL REPORT		FLORIDA DEPARTMENT OF 61ATE Secretary or State			STATE	Mar 31 1998	
A A A A A A A A A A A A A A A A A A A			CORPORATIONS			Secretary of	f State
DOCUI	MENT # J2739 2	2 (6)	, <u></u> .				
	& BOWERS, CPA, P.A.	` '					
						A SECULAR DING MADE SOCIA PRINCIPALI DE LA CRESCA DI DI LA CRESCA DI DI CALI	AL SIGN DIBIL DIBIL IBBI
Principal Plac	e of Rusiness	Mailing Address					
Principal Place of Business Mailing Address * JIMMY L. LUNDY * JIMMY L. LUNDY							
1584 SOUTH PEARL ST 1584 SOUTH PEARL ST CRESTVIEW FL 32539 CRESTVIEW FL 32539						DO NOT WRITE IN THIS SP.	ACE.
US	L SELVIS	U\$	EN 12 02,000			3. Date Incorporated or Qualified	*CE
9 Principal D	lace of Business	Do Maria				08/05/1986	· • · · · · · · · · · · · · · · · · · ·
21 Principal P	INCO OF BUSINESS	2a. Mailing Address				4. FEI Number 59-2711419	Applied For Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.					\$8.75 Additional
City & State		City & State			· 	6. Election Campaign Financing	Fee Required
23		28				Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 24	Country 25	Z ip 29	30 Co	untry		8. This corporation owes or has paid the currer Personal Property Tax due June 30.	
	9. Name and Address of Currer		100			10. Name and Address of New Registered Ag	
	NDY, JIMMY L.			B1	Name		
1584 SOUTH PEARL ST CRESTMEW FL 32536				82 Street Address (P.O. Box Number is Not Acceptable)			
V 111				83			
				84	City		85 Zip Code
11. Pursuant	to the provisions of Sections 607.050	02 and 607.1508, Florida Statu	tes, the a	bove	-named cor	poration submits this statement for the purpose of ch	anging its registered
office or re agent. I a	egistered agent, or both, in the State m familiar with, and accept the oblig	of Florida Such change was lations of, Section 607.0505, Fl	authorize lorida Sta	d by tutes	the corpora	poration submits this statement for the purpose of chalion's board of directors. I hereby accept the appoin	tment as registered
SIGNATURE	Signature, typod or printed name of registered age						
12.	OFFICERS AN	D DIRECTORS	13.	a Age	ut signalure requ	Ired when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND D	IRECTORS IN 12
TITLE	P MAN	DELETE	1.1 TI	TLE			Change Addition
NAME STREET ADDRESS	LUNDY, JIMMY L. 6053 W. DOGWOOD DRIVE		12 N		4000500		ļ
CITY-ST-ZIP	CRESTVIEW FL			ITY-SI	ADDRESS [-ZIP		l i
TITLE	ST	☐ DELETE	211				Change Addition
NAME	BOWERY, DANIEL A.		2.2 N	AME			
STREET ADDRESS	6156 W. DOGWOOD DRIVE CRESTVIEW FL				ADDRESS		
CITY-ST-ZIP TITLE	ONEOTHEW TE	☐ DFLETE	2. 4 C	1TY - \$	T-ZIP	*	Change Addition
NAME		_ vicin	3.2 N			· ·	, change Audition
STREET ADDRESS			3.3 STREET A		ADDRESS		j
CITY-ST-ZIP				ITY-S			
TITLE		DELETE	4.1 Ti				Change
NAME			4.2 N	AME			
STREET ADDRESS			4.3 S	REET	ADORESS		
CITY-ST-ZIP	•	T DELETE		TY-ST	- ZIP		Observe To Lieu
TITLE NAME		☐ DELETE	51 TI			Li	Change
NP-VINE,			5.2 N	MI:			

CITY-S1-ZIP

14. I 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 of 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 composition or the 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 composition or the report is required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if charged, or overall aladhright with an address.

6.1 TITLE

6.2 NAME

DELETE

5.3 STREET ADDRESS 5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

Change

Addition