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

PROFIT CORPORATION ANNUAL REPORT

1998

Principal Place of Business

% C. F. VAN ATTA 910 AIRPORT RD., SUITE A-3 DESTIN FL 32541



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name

(0)

VAN ATTA ASSOCIATES, INC.

Mailing Address

% C. F. VAN ATTA 910 AIRPORT RD., SUITE A-3

DESTIN FL 32541

FILED

Feb 05 1998 8:00am

Secretary of State

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

						12/22/1986		
2. Principal P	ace of Business	2a. Mailing Address				4. FEI Number	F	Applied For
21		26				59-2782877	1	lot Applicable
Suite, Apt.	•	Suite, Apt. #, etc.				5. Certificate of Status Desired		Additional
	ountain Drive	27 P.O. Box 456				3. Certificate of Status Besiled	Fee F	Required
City & State		City & State				6. Election Campaign Financing	\$5.00	May Be
23 Desti		28 Destin, FL				Trust Fund Contribution	Addec	to Fees
Zip	Country	Zip	_	ountry		8. This corporation owes or has paid the		
24 32541	25 Okaloosa	29 3254 0	30	<u>0ka</u>	loosa	Personal Property Tax due June 30.		No No
Name and Address of Current Registered Agent						10. Name and Address of New Regist	ered Agent	
VAN ATTA, C. F.				81	Name			
910	AIRPORT RD	82 Street A			Street Add	dress (P.O. Box Number is Not Acceptable)		
	TE C					Mountain Drive		
DES	STIN FL 32541	83 Su			Suite	e 103		
					City		85 Zip	Code 2541
							FL 8 3	2541
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								
	Stgnature, typed or printed name of registered agent				nt signature requ		ATE	20 01 40
12.	PST OFFICERS AND	DIRECTORS DELETE	13			ADDITIONS/CHANGES TO OFFICERS	Change	Addition
TITLE	MANI ATTA O C			TITLE	İ		- Gridings	I VOOIDON
NAME	407 SPRING LANE		1.2 N					
DESTINI EI					ADDRESS			f
CITY-ST-ZIP	DEOTIN FE			ÇITY- <u>S</u> î	T-ZIP			
TITLE				TITLE	}		☐ Change	☐ Addition ☐
NAME			2.2 NA		- 1]
STREET ADDRESS		2.3 ST		STREET	ADORESS			}
CITY-ST-ZIP				CITY-S	T-ZIP			
TITLE		☐ DELETE 3.1		TITLE			Change	Addition
NAME		3.2 N/		NAME				
STREET ADDRESS		3.3 ST		STREET	ADDRESS			
CITY-ST-ZIP		3.4. C		CITY-S	T-ZIP			
TITLE		☐ DELETE 4.1 T		TITLE			☐ Change	Addition
NAME		4. 2 N		NAME				-
STREET ADDRESS			4.3 STREI		ADDRESS			
CITY-ST-ZIP			4.4 CTY-ST-7		r-ZIP			
TITLE		DELETE	5.1	5.1 TITLE			☐ Change	☐ Addition
NAME			5,2	5.2 NAME				}
STREET ADDRESS			5.3	5.3 STREET ADDRESS				
CITY-ST-ZIP				CITY-ST				
TITLE		DELETE	_	TITLE			Change	Addition
NAME				NAME	}			
STREET ADDRESS					ADDRESS			
CITY-ST-ZIP								}
	this filing does not qualify for		6.4 City-ST-ZIP the exemption stated in S		Section 119.07(3)(i), Florida Statutes. I furth	er certify that the	e information	
indicated	on this annual report or supplemental a	annual report is true and acc	urate a	nd tha	it my signati	ure shall have the same legal effect as if mad	ie under oath; th	nat 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:

Van Atta

(850) 837-0409