

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

FILED
Jun 25 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # L16332 (3)

1. Corporation Name
RIGGS, STOREY, FULMER & INGRAM, P.A.



Principal Place of Business 348 SW MIRACLE STRIP PKWY. STE. 34 FT. WALTON BCH. FL 32548 US	Mailing Address 348 SW MIRACLE STROP PKWY. STE. 34 FT. WALTON BCH. FL 32548 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
24 Country	29 Country
25	30

3. Date Incorporated or Qualified 09/13/1989	
4. FEI Number 59-2962592	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**FLEET, BART ESQUIRE
 -1201 NORTH EGLIN-PARKWAY
 -SHALIMAR FL-32579**

10. Name and Address of New Registered Agent

81 Name
D. Timothy Herndon

82 Street Address (P.O. Box Number is Not Acceptable)
4502 Highway 20 East, Suite A

83

84 City
Niceville,

85 Zip Code
FL 32578

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 *[Signature]* DATE

12. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> DELETE
NAME	RIGGS, STEVE	
STREET ADDRESS	348 SW MIRACLE STRIP PKWY., #34	
CITY - ST - ZIP	FT. WALTON BCH. FL	
TITLE	SD	<input type="checkbox"/> DELETE
NAME	STOREY, PAUL	
STREET ADDRESS	348 SW MIRACLE STRIP PKWY., #34	
CITY - ST - ZIP	FT. WALTON BCH. FL	
TITLE	TD	<input type="checkbox"/> DELETE
NAME	FULMER, TIM	
STREET ADDRESS	1077 HWY 98 E	
CITY - ST - ZIP	DESTIN FL	
TITLE	VD	<input type="checkbox"/> DELETE
NAME	MARTIN, LILLIAN G	
STREET ADDRESS	1348 CARMICHAEL WAY	
CITY - ST - ZIP	MONTGOMERY AL	
TITLE	VD	<input type="checkbox"/> DELETE
NAME	HERNDON, TIMOTHY D	
STREET ADDRESS	4502 HWY. 20 E., STE. A	
CITY - ST - ZIP	NICEVILLE FL	
TITLE	VD	<input type="checkbox"/> DELETE
NAME	INGRAM, PHYLLIS S	
STREET ADDRESS	1348 CARMICHAEL WAY	
CITY - ST - ZIP	MONTGOMERY AL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - 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 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 my address.

SIGNATURE *[Signature]*

CP2E034 (10/97)