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FILED
Feb 10 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 # L20392 (1)

1. Corporation Name
SALANA HEIGHTS, INC.

Principal Place of Business	Mailing Address
100 ESCAMBIA ST MILTON FL 32570	100 ESCAMBIA ST MILTON FL 32570-6728

3. Date Incorporated or Qualified: 10/02/1989
3a. Date of Last Report: 06/20/1996

2. Principal Place of Business
21 100 N. SPRING ST.
Suite, Apt. #, etc.
22 ~~Mail Code~~
City & State
23 FLORIDA, PENSACOLA
Zip
24 32501
Country
25 ESCAMBIA

2a. Mailing Address
26 100 N. SPRING ST.
Suite, Apt. #, etc.
27
City & State
28 ~~MILTON~~ PENSACOLA, FL
Zip
29 32501
Country
30 ESCAMBIA

4. FEI Number: 59-2973012 ☐ 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

BRANTLEY, RONALD S.
100 ESCAMBIA ST.
MILTON FL 32570

10. Name and Address of New Registered Agent

81 Name: BRANTLEY, RONALD S.
82 Street Address (P.O. Box Number is Not Acceptable): 100 NORTH SPRING ST.
83
84 City: ~~MILTON~~ PENSACOLA FL 85 Zip Code: 32501

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 Signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	DP	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	BRANTLEY, RONALD S.		1.2 NAME		
STREET ADDRESS	5700 ENGLISH TURN DR.		1.3 STREET ADDRESS		
CITY-ST-ZIP	PACE FL		1.4 CITY-ST-ZIP		
TITLE	DV	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	SHANKS, SCOTT E.		2.2 NAME		
STREET ADDRESS	2980-B PIPE LINE ROAD		2.3 STREET ADDRESS		
CITY-ST-ZIP	BIRMINGHAM AL		2.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	LUCAS, TERESA T.		3.2 NAME		
STREET ADDRESS	109 LANE AVE		3.3 STREET ADDRESS		
CITY-ST-ZIP	BREWTON AL		3.4 CITY-ST-ZIP		
TITLE	SD	☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME	BRANTLEY, BARBARA S		4.2 NAME		
STREET ADDRESS	5700 ENGLISH TURN DR.		4.3 STREET ADDRESS		
CITY-ST-ZIP	PACE FL		4.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME	LUCAS, ROBERT D		5.2 NAME		
STREET ADDRESS	109 LANE AVE		5.3 STREET ADDRESS		
CITY-ST-ZIP	BREWTON AL		5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

CR2E034 (9/96)

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: 1-27-97 904-433-5075