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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(3)

C AND G INVESTMENTS, INC.

FILED May 05 1998 8:00am Secretary of State



Principal Place of Business Mailing Address									
42 E. GARDEN PENSACOLA F	42 E. GARDEN ST. PENSACOLA FL 32501								
PENSHOULK	-C 96301	PENSAGOLA PE 32301	PENSAGOEN PE SESOI			DO NOT WRITE IN THIS SPACE			
						 Date Incorporated or Qualified 10/03/1989 			
2. Principal Pl	ace of Business	2a. Mailing Address	2a. Mailing Address			4. FEI Number	Applied For		
21		26				59-2972600	Not Applicable		
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired			Additional
27			alo						equired
City & State	•	City & State	├ - ¬ ´			6. Election Campaign Financing Trust Fund Contribution	П		May Be to Fees
Zip Country		28	Zip Country			This corporation owes or has pair	d the curr		
24	25	29	30	y		Personal Property Tax due June	_		No
27	9. Name and Address of Current Registered Agent					10. Name and Address of New Reg		gent	
KEL	LEY, CHERYL E.			81	Name				
	E GARDEN ST.		82 Street Ad		Street Addre	ess (P.O. Box Number is Not Acceptab	e)		
	ISACOLA FL 32501				Oli COL Malan	DSS (F.O. DOX 1401/1007 ID 1401/1000 place			
				83					
			-	84	City	The state of the s		85 Zip	Code
							<u>FL</u>	<u> </u>	
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 (sprillar with, and accept the obligations of, Section 607.0505, Florida Statutes.									
SIGNATURE Statemen is pred or 16 third narray of requiring a point and hitter available. (NOTE Registered Agent signature required when reinstating) DATE									
Stateburn, typed or Onted name of registered agent and high applicable. (NOTE Re 12. OF FICERS AND DIRECTORS			13.	Agen	i signature require	ADDITIONS/CHANGES TO OFFIC		DIRECTOR	RS IN 12
TITLE	VP			LA TITLE				Change	Addition
NAME	KELLEY, CHERYL		1.2 NA	ME					i
STREET ADDRESS	5140 ROWE TRAIL			REET A	NDDRESS				
CITY-ST-ZIP	PACE FL		1.4 C/T	Y-S1-	-ZIP				
TITLE	7	DELETE 2.1		LE				Change	Addition
NAME	KELLEY, LARRY D.		2.2 N/						
STREET ADDRESS	\$140 ROWE TRAIL		2.3 ST		ADDRESS				
CITY-ST-ZIP	PACE FL		2.4 CITY-ST-ZIP		r-Z I P			Channe	Addison
TITLE	ST PERFORM	DELETE						Change	Addition
NAME	KELLEY, JERRY L. 5001 GRANDE DR. #1722		3.2 NAM						
STREET ADDRESS	DEMOACOLA EL				ADDRESS				
CITY-ST-ZIP	I PITOVOOPIA I P	DELETE	3.4. CI 4.1 TIT		- 28P			Change	Addition
TITLE			4. 2 NAI		Ì				
	-				ADDRESS				
STREET ADDRESS CITY-ST-ZIP				TY-ST-	1				
TITLE		DELETE	5.1 TIT					Change	☐ Addition
NAME			5.2 NA	ME					
STREET ADDRESS			5.3 ST	REET A	ADORESS				
CITY-ST-ZIP	•		5.4 CH	5.4 CITY - ST - ZIP					
TITLE			6.1 TITLE					Change	Addition
NAME	6		6.2 NA	6.2 NAME					
STREET ADDRESS			6.3 ST	REET A	ADDRESS				
CITY-ST-ZIP			6.4 CII	TY-ST	- ZIP	Facility 440 07/07/0 Florido Statutos 1		556 - al 11-9	1.2

Thereby 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 informatio 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 trusted 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.

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