2008 FOR PROFIT CORPORATION ANNUAL REPORT

NAME STREET ADDRESS CITY-ST-ZIP IIIE

STREET ADDRESS CITY-ST-ZIP

COMMERCIAL COMPRESSIONAL นหนา เลือ หลังเกราน์

FILED Apr 10, 2008 08:00 All Secretary of State DOCUMENT # L40084 1. Entity Name THE ROCK CORPORATION OF PANAMA CITY BEACH. INC. Principal Place of Business Mailing Address 9322 FRONT BEACH RD 9322 FRONT BEACH ROAD PANAMA CITY BCH, FL 32407 PANAMA CITY BCH, FL 32407 US CR2E034 (11/05) 04062008 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-2984932 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent ROCK, DAVID A DO NOT WRITE 9322 FRONT BEACH RD PANAMA CITY BEACH, FL 32407 IN THIS SPACE 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Lam familiar with, and accept the obligations of registered agent. . . . SIGNATURE. . Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) U00000888254 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 04/22/08-80007-002 150.00 Trust Fund Contribution. § Added to Fees After May 1, 2008 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. DPVP TITLE NAME ROCK, BOBBIE 9322 FRONT BEACH RD. STREET ADDRESS CITY-ST-ZIP PANAMA CITY BCH, FL 32407 TITLE DST ROCK, DAVID A. NAME STREET ADDRESS 9322 FRONT BEACH RD. CITY-ST-7IP PANAMA CITY BCH, FL 32407 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CiTY-ST-ZIP TITLE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: /