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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

**Katherine Harris** 

Secretary of State DIVISION OF CORPORATIONS

## Mar 30, 1999 8:00 am Secretary of State 03-30-1999 90042 039 \*\*\*150.00

	1999	03-30-1999 90042 039 ***150.00						
1. Corporation	MENT # <b>L40960</b>							
ALFORD ENTERPRISES OF BAY COUNTY, INC.								
ALFORD ENTERFRISES OF BAT COCKETS, INC.					1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Office work biller office	i Braji Bibis Bi	ELI BIÐIS SÐB
Principal Plac	e of Business	*	Olisi Orii Qiali eibi	414() <b>  </b> 1011   01	(81) 818)  1881 			
Principal Place of Business Mailing Address  % CHARLES E. ALFORD. SR. % CHARLES E. ALFORD. SR.								
180 N. TYNDALL PKWY. 180:N:-TYNDALL-PKWY.					00 1107 111	NTE IN THIS O		
=PANAMA-GITY-FL-32404 PANAMA CITY FL 32404						DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualifed		
					,	01/04/1990		
2. Principal Place of Business 2a. Mailing Address					4. FEI Number		Apr	died For
21	26				59-2982965		Not	Applicable
Suite, Apt. #, etc. Suite, Apt. #					5. Certifcate of Status Desired		\$8.75 A	<b>I</b>
22	A COMPANY OF THE PARTY OF THE P	27					Fee Rec	quired
<b>⊢</b> '	ity & State City & State				6. Election Campaign Financin	<sup>3</sup> 🗆 .	\$5.00	
23	Country	28	Countr		Trust Fund Contribution		Added to	rees
Zip	Country	Zip 3	Countr	у	This corporation owes the corporation of			□No
24	9. Name and Address of Current		<u> </u>		10. Name and Address of New			
			8	Name	, THE P. LET.		<del></del>	
ALFORD, CHARLES E., SR.				2 Street A	ddress (P.O. Box Number is Not Acce	ntable)	<del>_</del>	
239 HUGH THOMAS DR.			"	Subera	duless (F.O. Dox Humber is Not Acce		_	
PANAMA CITY FL 32404-5551			83	3				}
				City			85 Zip C	ode
				<u></u>		FL		
-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.								
agent, l a	m familiar with and accept the obligati	ons of, Section 607.0505, Florid	a Statute	S.				
SIGNATURE	Signature, typed or prints have of registered agent	and title if applicable. (NOTE: Re	egistered Age	ent signature reg	quired when reinstating)	DATE		}
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO C	FFICERS AND	DIRECTO	RS IN 12
TITLE	PD					[	Change	☐ Addition
NAME	ALFORD, CHARLES E.							
STREET ADDRESS			1.3 STREI	ET ADDRESS				
CITY-ST-ZIP			1.4 CITY-					
TITLE 	ST DELETE 2.17			ì		Į	Change	☐ Addition
NAME	ALFORD, JOYCE W.			1				
STREET ADDRESS	200			ET ADDRESS				ļ
CITY-ST-ZIP			2. 4 CITY- 3.1 TITLE				Change	Addition
NAME			3.2 NAME			L		_
STREET ADDRESS	239 HUGH THOMAS DR.		1	ET ADDRESS				
CITY-ST-ZIP	PANAMA CITY FL		3.4. CITY-	- 1	* * **			
TITLE		☐ DELETE	4.1 TITLE			ί	Change	☐ Addition
-NAME	L. Line	man a company of the	4. 2 NAME	Ī				1
STREET ADDRESS	,	The state of the s	4.3 STRE	ET ADDRESS -	manufacture at the second of t	- Company		
CITY-ST-ZIP			4.4 CITY-		<u> </u>			
TITLE		☐ DELETE	5.1 TITLE			[	Change	Addition
NAME			5.2 NAME					}
STREET ROOKES				ET ADDRESS	•	•	•	
CITY-ST-ZIP.	The second secon	□ DELETE	5.4 CITY- 6.1 TITLE		· · · · · · · · · · · · · · · · · · ·	·		Addition
NAME		<b>—</b>	6.2 NAME			•		
STREET ADDRESS			6.3 STRE	ET ADDRESS				J
CITY-ST-ZIP			6.4 CITY-	ST-ZIP				İ

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 an address, with all other like empowered.

SIGNATURE: