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

PROFIT CORPORATION ANNUAL REPORT

1998

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

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TIERRA DEVELOPMENT, INC.

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FILED

May 20 1998 8:00am

Secretary of State

Principal Place	of Business	Mailing Address						,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	01911 1001
8251 NAVARRE PARKWAY 161 HOMEWOOD DR.					1				
NAVARRE FL 32566 US		FT. WALTON BEACH FL 32548 US				DO NOT WRITE IN THIS SPACE			
03		00			<u> </u>	3. Date Incorporated or Qualified			
						07/10/1990			
2. Principal Pl	ace of Business	2a. Mailing Address				4. FEI Number		Ap	plied For
21 161 H	omewood Drive	26				59-3021341		No	t Applicable
Suite, Apt. 1	#, etc	Suite, Apt. #, etc.	en in in the state of the state			5. Certificate of Status Desired	K	\$8.75 A	
City & State)	City & State				6. Election Campaign Financing		\$5.00	May Be
23	alton Beach, FL	28				Trust Fund Contribution		Added to	
Zip	Country	Zφ	Coun	ry		8. This corporation owes or has pa	_		1
24 32548	-6340 ₂₅ Okaloosa	29	30			Personal Property Tax due June			J No
Name and Address of Current Registered Agent DOMAN DODEDT A 81 N						10. Name and Address of New Re	gistered A	rgent	
Downs, Robert A.				81 Name					
161 HOMEWOOD DRIVE FT. WALTON BEACH FL 32548			Ē	2 Street	t Addres	ress (P.O. Box Number is Not Acceptable)			
F1+	TIALION DENOTITE 32070		E	3				-	· · · · · · ·
	•		E	4 City				85 Zip (Code
							<u>FL</u>		
11. Pursuant to office or reason. Let	o the provisions of Sections 607,0502 egistered agent, or both, in the State on Infamiliar with, and accept the obligat	and 607.1508, Florida Statu of Florida. Such change was tions of. Section 607.0505, F	ites, the abo authorized lorida Statu	ove-named by the cortes.	d corporation	ration submits this statement for the parts to board of directors. I hereby accept	urpose of at the appr	changing its pintment as	registered
_									
SIGNATURE	Stonature, typied or printed name of registered agent	and title if applicable (NO	TE: Registered	Agent signatur	re required	wheri reinstating)	DATE		
12.	OFFICERS AND	DIRECTORS	13.			ADDITIONS/CHANGES TO OFFIC			
TITLE	PS	☐ DELETE	1.1 TITU	E				Change	☐ Addition
NAME ROY, PHILLIP V		1.21		NAME					
STREET ADDRESS 8251 NAVARRE PARKWAY		1.3 STREET AD		ET ADDRESS	810	3 Carmona			
CITY-ST-ZIP	NAVARRE FL	1,4 0		- S7 - ZIP	Nav	avarre FL 32566			
TITLE	УI	☐ DELETE	2.1 TITL	E				Change	Addition
NAME	D OWNS, ROBERT A		2.2 NAM	E	1				
STREET ADDRESS	161 HOMEWOOD DR		2.3 STR	ET ADDRESS	,				
CITY-ST-ZIP	FT WALTON BCH FL		2. 4 CIT	(-ST-ZIP					
TITLE		☐ DELETE	3.1 TITU	Ē				Change	Addition
NAME			3.2 NAME						-
STREET ADDRESS			3.3 STREET ADDRESS		;				
CITY-ST-ZIP			3.4 CIT	r-S1-ZIP				_	
TITLE		☐ DELETE	4.1 101).	ŧ				Change	Addition
NAME			4. 2 NA	ME.					
STREET ADDRESS			4.3 STR	E1 ADDRESS	;				
CATY-ST-ZIP			4.4 CiTy	- \$1 - ZIP					
TITLE		DELETE	5.1 TITL	F				Change	Addition
NAME			5.2 NAN	1E					
STREET ADDRESS			5.3 STR	ET ADDRESS	;				
CITY-ST-ZIP			5.4 CITY	- ST - ZIP					
TITLE	0	DELETE	6.1 TITL	E				Change	Addition
NAME	:		6.2 NAN	tE.					j
STREET ADDRESS			6.3 S1R	EET ADDRESS	;				

14. Thereby certify that the information supplied with this filing cloes 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 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 appearance with an address.