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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998

DOCUMENT # M77194

(2)

City & State 28	LAWY	ERS TITLE AGENCY OF NO	REH ELORIDA, INC.			
# FALCON B., JR. 3001 HWY 77 LYNN HAVEN FL 32444 # FALCON B. SELLARS, JR. 3001 HWY 77 LYNN HAVEN FL 32444 # FALCON B. SELLARS, JR. 3001 HWY 77 LYNN HAVEN FL 32444 # FALCON B. SELLARS, JR. 3001 HWY 77 LYNN HAVEN FL 32444 # FALCON B. SELLARS, JR. 3001 HWY 77 # FALCON B., JR. 3001 HWY 77 LYNN HAVEN FL 32444 # FALCON B., JR. 3001 HWY 77 LYNN			1111 1201110711 11101			
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25 29 30 Personal Property Tax due June 30. Yes No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent SELLARS, FALCON B., JR. 3001 HWY 77 2.5 TREET ADDRESS 3001 HWY 77 3.3 STREET ADDRESS 3001 H						
9. Name and Address of Current Registered Agent SELLARS, FALCON B., JR. 3001 HWY 77 LYNN HAVEN FL 32444 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statules, the above-named corporation submits this statement for the purpose of changing its 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, and tamiliar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE SIGNATURE OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 17. ITILE PD NAME SELLARS, FALCON B., JR. 1.2 NAME SELLARS, FALCON B., JR. 1.3 STREET ADDRESS 1.1 STREET ADDRESS 1.1 STREET ADDRESS 1.2 NAME BEASLEY, DARLENE F. 2.2 NAME STREET ADDRESS 3001 HWY 77 2.2 STREET ADDRESS 3001 HWY 77 2.2 STREET ADDRESS 3001 HWY 77 2.2 STREET ADDRESS 3001 HWY 77 3.3 STREET ADDRESS 3001 HWY 77 3.4 CITY-ST-ZIP Change Addition Addition Addition ACTIV-ST-ZIP ADDITIONS/CHANGES TO OFFICERS ADDRESS 4. City -ST-ZIP ADDITIONS/CHANGES TO OFFICERS ADDRESS 4. City -ST-ZIP ADDITIONS/CHANGES TO OFFICERS ADDRESS 4. City -ST-ZIP	 , '	— ·	⊢ .		8. This corporation owes or has paid the curr	ent year Intangible
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LYNN HAVEN FL 32444 83 84 City FL 85 Zip Code 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 agent, and tamiliar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 11. TITLE PD D DELETE 11. TITLE PD D DELETE 11. TITLE SELLARS, FALCON B., JR. 12. NAME SELLARS, FALCON B., JR. 12. NAME SELLARS, FALCON B., JR. 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition NAME SELLARS, FALCON B., JR. 12. NAME SELLARS, FALCON B., JR. 13. STREET ADDRESS CITY-ST-ZP LYNN HAVEN FL 14. CITY-ST-ZP ITILE ST AMB BEASLEY, DARLENE F. 22. NAME SEEVELL, RHONDA H. 32. NAME SEEVELL, RHONDA H. 32. NAME STREET ADDRESS CITY-ST-ZP LYNN HAVEN FL 30.01 HWY 77 33. STREET ADDRESS CITY-ST-ZP LYNN HAVEN FL 30.01 HWY 77 33. STREET ADDRESS CITY-ST-ZP LYNN HAVEN FL 30.01 HWY 77 33. STREET ADDRESS CITY-ST-ZP LYNN HAVEN FL 30.01 HWY 77 33. STREET ADDRESS CITY-ST-ZP LYNN HAVEN FL 30.01 HWY 77 33. STREET ADDRESS CITY-ST-ZP LYNN HAVEN FL 34. CITY-ST-ZP LYNN HAVEN FL 35. Change Addition Addition Addition AND Change Addition Addition AND STREET ADDRESS LYNN HAVEN FL 34. CITY-ST-ZP LYNN HAVEN FL 35. Change Addition Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition Addition Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 ADDITI				of Name		
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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 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, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating.) DATE	LY	NN HAVEN FL 32444		83		
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 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, and the state of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent armiliar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE				**		
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, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE SIGNATURE SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE PD		•			FL	1 1 "
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14. I hereby certify that the information supplied with this filling 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 change 1, or on an attachment with an address.

FILED

Jan 29 1998 8:00am

Secretary of State