FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT
1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **M94255** **(0)**

1. Corporation Name

DYKES PROPERTIES, INC.

Principal Place of Business
10811 FRONT BEACH ROAD
PANAMA CITY BEACH FL 32407

Mailing Address
10811 FRONT BEACH ROAD
PANAMA CITY BEACH FL 32407

2. Principal Place of Business
21
Suite, Apt. #, etc.
22
City & State
23
Zip 24 | Country 25

2a. Mailing Address
26
Suite, Apt. #, etc.
27
City & State
28
Zip 29 | Country 30

3. Date Incorporated or Qualified: 08/04/1988
3a. Date of Last Report: 03/13/1995
4. FEI Number: 59-2897521 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

GRAY, FRANK W.
108 W. 13TH STREET
PANAMA CITY FL 32401

10. Name and Address of New Registered Agent

81 Name
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 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.

SIGNATURE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D ☐ DELETE	1.1 TITLE	☒ Change ☐ Addition
NAME	DYKES, HAROLD E., SR	1.2 NAME	
STREET ADDRESS	1214 FOSTER AVE	1.3 STREET ADDRESS	
CITY-ST-ZIP	PANAMA CITY FL	1.4 CITY-ST-ZIP	Zip - 32401
TITLE	D ☐ DELETE	2.1 TITLE	☒ Change ☐ Addition
NAME	DYKES, LESTER F.	2.2 NAME	
STREET ADDRESS	~~CONDO 145 GULF HIGHLANDS~~	2.3 STREET ADDRESS	126 SEACLUSION CR
CITY-ST-ZIP	PANAMA CITY FL	2.4 CITY-ST-ZIP	PANAMA CITY, FL 32413
TITLE	D ☐ DELETE	3.1 TITLE	☒ Change ☐ Addition
NAME	DYKES, HAROLD E., JR	3.2 NAME	
STREET ADDRESS	10996 W. HWY. 98	3.3 STREET ADDRESS	
CITY-ST-ZIP	PANAMA CITY FL	3.4 CITY-ST-ZIP	Zip - 32405
TITLE	D ☐ DELETE	4.1 TITLE	☒ Change ☐ Addition
NAME	DYKES, BRUCE C.	4.2 NAME	
STREET ADDRESS	~~4400 MEMORIAL DR #3044~~	4.3 STREET ADDRESS	1214 Foster Ave
CITY-ST-ZIP	~~HOUSTON TX~~	4.4 CITY-ST-ZIP	Panama City, FL 32401
TITLE	☐ DELETE	5.1 TITLE	D ☐ Change ☒ Addition
NAME		5.2 NAME	Lynette Dykes
STREET ADDRESS		5.3 STREET ADDRESS	1214 Foster Ave
CITY-ST-ZIP		5.4 CITY-ST-ZIP	Panama City, FL 32401
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE: [signature] LESTER DYKES 4-10-96 234-5942
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (12/95)