2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Jul 14, 2008 8:00 am Secretary of State

C7-14-2008 90030 025 ***61.25 C7-14-2008 90030 025 ***61.2		ANNUAL	REPORT				00020 025 ****	
2. Principal Place of Business - No PC Box # 3. Mailing Address Suria, Apt. #, etc.	1. Entity Nan	ne		c. (-	90030 025 *****	01.25
Surie, Apr. #, etc. Surie, Apr. #, etc. Surie City & State City & Cit	2100 WEST BEACH DRIVE 21		2100 WEST BEACH DRIV	2100 WEST BEACH DRIVE				
City & State Country	Principal Place of Business - No P.O. Box # 3. M		3. Mailing Address					
Zip Country Zip Country	Suite, Apt. #, etc.		Suite, Apt. #, etc.		07032008	Chg-NP	CR2E037 (12/06)	
Signal Applies by September 12, 2008 Filing Foe is \$6.1.25 Due by September 12, 2008	City & State		City & State			22	 '	 -
SIGNATURE Signature Crivy FL Supcode Signature requested agent, or both, in the State of Florida. Lam familiar with, and accept time obligations of registered agent, or both, in the State of Florida. Lam familiar with, and accept time obligations of registered agent, or both, in the State of Florida. Lam familiar with, and accept time obligations of registered agent, or both, in the State of Florida. Lam familiar with, and accept time obligations of registered agent, or both, in the State of Florida. Lam familiar with, and accept time obligations of registered agent, or both, in the State of Florida. Lam familiar with, and accept time obligations of registered agent, or both, in the State of Florida. Lam familiar with, and accept time obligations of registered agent, or both, in the State of Florida. Lam familiar with, and accept time obligations of registered agent, or both, in the State of Florida. Lam familiar with, and accept time obligations of registered agent, or both, in the State of Florida. Lam familiar with, and accept time obligations of registered agent, or both, in the State of Florida. Lam familiar with, and accept time obligations of registered agent, or both, in the State of Florida. Lam familiar with, and accept time obligations of registered agent, or both, in the State of Florida. Lam familiar with, and accept time obligations of registered agent, or both, in the State of Florida. Lam familiar with, and accept time obligations of registered agent, or both, in the State of Florida. Lam familiar with, and accept time obligations of registered agent, or both in the State of Florida. Lam familiar with, and accept time obligations of registered agent, or both in the State of Florida. Lam familiar with, and accept time obligations of registered agent, or both in the State of Florida. Lam familiar with, and accept time obligations of registered agent, or both in the State of Florida. Lam familiar with, and accept time obligations of registered agent,	Zip	Country	Zip	Country	5. Certificate of	Status Desired	☐ \$8.75 Add	ditional
SIGNATURE PANAMA CITY, FL 32401 Signet Address (P. D. Boy Number is Not-Acceptable) Signet Address (P. D. Boy Number is Not-Acceptable) Signet Address (P. D. Boy Number is Not-Acceptable) Signet Address (P. Downlin's State of Florida Department of the purpose of changing its registered diffice or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registerid gapent. EXA* E. Dowlin's Signet Address (P. D. Boy Number is Not-Acceptable) Signet Address (P. Dowlin's State of Florida Department of Sta		6, Name and Address of Current	Registered Agent		7. Name and Ad	dress of New Ro	egistered Agent	•
8. The above named enitry submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registerior gapent. CEXA E DOWLLING	2100 W BEACH DRIVE			Street A	Street Address (P.O. Box Number is Not Acceptable)			
8. The above named entity kubmis his statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. CEXA E DOWLLIFG				City	a city		FL Zip Cod	<u> </u>
SIGNATURE LEXA E. DOWLLING Styrature required name of repostored agent and table a speciation. Signature required agent agreed agree	8. The above	named entity submits this statement fo	r the purpose of changing its re			n the State of Flo		
Filing Fee is \$61.25 Due by September 12, 2008 5. Election Campaign Financing Trust Fund Contribution. 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE PD CHAMBERS, JOHN SIREET ADDRESS CITY-ST-2IP PANAMA CITY, FL 32401 TITLE S SIREET ADDRESS CITY-ST-2IP TALLAHASSEE, FL 32303 TITLE TITLE TD SIREET ADDRESS CITY-ST-2IP TALLAHASSEE, FL 32303 TITLE NAME SIREET ADDRESS CITY-ST-2IP TALLAHASSEE, FL 32303 TITLE NAME SIREET ADDRESS CITY-ST-2IP TALLAHASSEE, FL 32303 TITLE NAME SIREET ADDRESS CITY-ST-2IP PANAMA CITY, FL 32401 TITLE TO SIREET ADDRESS CITY-ST-2IP TALLAHASSEE, FL 32303 TITLE NAME SIREET ADDRESS CITY-ST-2IP TALLAHASSEE, FL 32303 TITLE NAME SIREET ADDRESS CITY-ST-2IP TALLAHASSEE, FL 32303 TITLE NAME SIREET ADDRESS CITY-ST-2IP TALLAHASSEE, FL 32401 TITLE TO SIREET ADDRESS CITY-ST-2IP PANAMA CITY, FL 32401 TITLE TO SIREET ADDRESS CITY-ST-2IP PANAMA CITY, FL 32401 TITLE TO SIREET ADDRESS CITY-ST-2IP PANAMA CITY, FL 32401 TITLE TITLE TO SIREET ADDRESS CITY-ST-2IP PANAMA CITY, FL 32401 TITLE NAME SIREET ADDRESS CITY-ST-2IP PANAMA CITY, FL 32401 TITLE TITLE TO SIREET ADDRESS CITY-ST-2IP PANAMA CITY, FL 32401 TITLE TITLE TO SIREET ADDRESS CITY-ST-2IP PANAMA CITY, FL 32401 TITLE TITLE TO SIREET ADDRESS CITY-ST-2IP PANAMA CITY, FL 32401 TITLE TITLE TO SIREET ADDRESS CITY-ST-2IP PANAMA CITY, FL 32401 TITLE TITLE TO SIREET ADDRESS CITY-ST-2IP PANAMA CITY, FL 32401 TITLE TITLE TO SIREET ADDRESS CITY-ST-2IP PANAMA CITY, FL 32401 TITLE TITLE TO SIREET ADDRESS CITY-ST-2IP PANAMA CITY, FL 32401 TITLE TITLE TO SIREET ADDRESS CITY-ST-2IP PANAMA CITY, FL 32401 TITLE TITLE TO SIREET ADDRESS CITY-ST-2IP PANAMA CITY, FL 32401 TITLE TO SIREET ADDRESS CITY-ST-2IP PANAMA CITY FL 32401 TITLE TO SIREET ADDRESS CITY-ST-2IP PANAMA CITY FL 32401 TITLE TO SIREET ADDRESS CITY-ST-2IP PANAMA CITY FL 32401 TITLE TO SIREET ADDRESS CITY-ST-2IP PANAMA CITY FL 32401 TITLE TO SIREET ADDRESS CITY-ST-2IP PANAMA CITY FL 32401 TITLE TO SIREET ADDRESS CITY-ST-2IP TO SIREET ADDRESS CITY	_	LEXA E. DOWLI		Registered Agent signatu	ire required when remstating)		DATE	
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NAME SIREET ADDRESS CITY-ST-ZIP PANAMA CITY, FL 32401 ITILE SAME SIREET ADDRESS CITY-ST-ZIP ITILE SAME SORMAN, DEREK L 2612 LUCERNE DRIVE TALLAHASSEE, FL 32303 ITILE NAME SIREET ADDRESS CITY-ST-ZIP Delete TITLE NAME SIREET ADDRESS CITY-ST-ZIP DELET SIREET ADDRESS CITY-ST-ZIP DELET TO NAME SIREET ADDRESS SIREET ADDRESS SIREET ADDRESS CITY-ST-ZIP PANAMA CITY, FL 32401 ITILE D LINDSEY, PENNY 2100 W BEACH DRIVE, S-101 PANAMA CITY, FL 32401 TITLE D LINDSEY, PENNY 2100 W BEACH DRIVE, T-101 SIREET ADDRESS CITY-ST-ZIP PANAMA CITY, FL 32401 ITILE NAME SIREET ADDRESS CITY-ST-ZIP PANAMA CITY, FL 32401 ITILE NAME SIREET ADDRESS CITY-ST-ZIP PANAMA CITY, FL 32401 ITILE NAME SIREET ADDRESS CITY-ST-ZIP PANAMA CITY, FL 32401 ITILE NAME SIREET ADDRESS CITY-ST-ZIP PANAMA CITY, FL 32401 ITILE NAME SIREET ADDRESS CITY-ST-ZIP PANAMA CITY, FL 32401 ITILE NAME SIREET ADDRESS CITY-ST-ZIP PANAMA CITY, FL 32401 ITILE NAME SIREET ADDRESS SIREET ADDRE	NAME STREET ADDRESS	CHAMBERS, JOHN 2100 W BEACH DRIVE, Q-202	☐ Delete	TITLE NAME STREET ADDRESS				
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			☐ Delete		· / ·		☐ Change	☐ Addition

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 truttee empowered to execute this report as required by Chapter 617, 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/11/08

850 867-6316

Daytime Phone #