SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

L	1998		DIVISION OF CORPORATIONS				Secretary of State					
DOCUMENT # N19714 (7)								50		.ar y	O1	State
	EXCHANGE CL	UB OF PANAM										
	ENDININGE OF	00 01 1744744	ŀ									
Ļ												
P	rincipal Place of Busin	ess	Maili	Mailing Address								
	O. BOX 2331		-	P. O. BOX 2331				3. Date incorporated	or Qualified			
F	Panama City FL 324 02		PAN	PANAMA CITY FL 92402				03/17/1987				
								4. FEI Number				Applied For
2.	Principal Place of Bu	siness	2a A	2a. Malling Address				59-2026692				Not Applicable
21		26					5. Certificate of State	us Desired			5 Additional Required	
	Suite, Apt. #, etc.			Suite, Apt. #, etc.				6. Election Campalg	n Financing			0 May Be
22				27				Trust Fund Contribution Added to Fees				
23	City & State	28	City & State				7. Is this nonprofit corporation a homeowners association?					
1	Zip	Country Zip			Country			8. This corporation of	was or has n			Internible
24		25	29		30	•		Personal Property			Yes	No
	9. Nan	ne and Address of		61 Name		10. Name and Addre	ss of New R	egistered	Agent			
Ì	HAUVERSBURK, M		82 Street	Address	s (P.O. Box Number Is	Not Accepta	ble)					
1	PANAMA CITY FL		ŀ	83				-				
FARAMA OILE FL 32401												
			84 City				FI	85 Z	ip Code			
11. Pursuant to the provisions of sections 617.0502 and 617.1508. Florida Statutes, the above-parted corporation submits this statement for the purpose of changing its recisioned												
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 617.0503, Florida Statutes.												
SI	GNATURE											
12		ed or printed name of registe OFFICE	RS AND DIRECT		13.	Agent signatur	re required	when reinstating) ADDITIONS/CHAN	GES TO OFF	DATE	ND DIDEC	TOPS IN 12
TIT	LE D			DELETE	1.1 TITI		D			TOETTO A	Chang	
NA	ME SHARP,	MIKE			1.2 NA	ME	Rok	sert Pell 37 Judson	C 1			700
STF		LABRIA ROAD			1.3 STR	EET ADDRESS	2.3	s7 Judson	→ .			
		CITY FL				Y-ST-ZIP	Ly	nn Haven	<u>H_</u>			
TIT	1:	LADDV			2.1 TITU 2.2 NAM	-	F	esa Howa	cd		Chang	e Addition
		/2 E. 13TH ST.				EET ADDRESS	211	N. Harris	Air.			
		CITY FL					0,	ama Citz				
TITI	E \$			DELETE	3.1 T(T)			, j	_		Change	e Addition
NAJ		NANCY L		_	3.2 NA		المل	nes Godi	UIM			
		RTH BAY DRIVE			3.3 STR	EET ADDRESS	313	Baldwin	Ave.			
CIT		AVEN FL			_		Par	lama Cit	3 7	<u></u>		
NAN	-	N, CHER ALLEN		DELETE	4.1 TITL 4.2 NAM	7	3 /2	huson, Si	. Δ m	lon	Change	e Addition
		DEN CLUB DR				EET ADDRESS	200	3 Garden	كسك	Dr.		
		CITY FL				r-ST-ZIP		nama Cit		. .		
TITE				DELETE	5.1 TITL		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	-	7		Change	e Addition
NA					5.2 NAM	NE	سما	ry Morr	IS		م المعالم المعالم	
STR		OOD VALLEY ROA	D		5.3 STR	EET ADDRESS	231	4 1/2 E.	1344;	51.		
		CITY FL				/-ST-ZIP	Par	rama Cit	4 FL			
TITL	•	N DECCY		DELETE	6.1 TITL		Ď		1	_	Change	e 🖸 Addition
NAN		N, PEGGY Ken Road			6.2 NAM	1E	pob	uby Richa	rosov	2		

CITY-ST-ZIP PANAMA CITY FL

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 em an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

850-872 -3784 Daytime Phone #

FILED

Sep 03 1998 8:00am'