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).

FILED
Oct 08 1998 8:00am
Secretary of State

0011655

NONPROFIT CORPORATION ANNUAL REPORT
1998

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

DOCUMENT # **N97000004597 (7)**

1. Corporation Name

CONDOMINIUM ASSOCIATION DIRECTORY, INC.

Principal Place of Business	Mailing Address
9850 S. THOMAS DRIVE PANAMA CITY BEACH FL 32408	9850 S. THOMAS DRIVE PANAMA CITY BEACH FL 32408

3. Date Incorporated or Qualified: 08/12/1997

4. FEI Number: 59-3438555 [ ] 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

7. Is this nonprofit corporation a homeowners association? [ ] Yes [ ] No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. [ ] Yes [ ] No

2. Principal Place of Business	2a. Mailing Address
21	26 P.O. Box 9600
22 Suite, Apt. #, etc.	27 N/A
23 City & State	28 Panama City Beach, FL
24 Zip / Country	29 32417 / 30 USA

9. Name and Address of Current Registered Agent

GERDE, JERRY W ESQ.
239 EAST FOURTH STREET
PANAMA CITY FL 32401

10. Name and Address of New Registered Agent

81 Name: Jack Williams
82 Street Address (P.O. Box Number is Not Acceptable): 302 Harmon Avenue
83
84 City: Panama City FL 85 Zip Code: 32401

11. Pursuant to the provisions of sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

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

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	President [ ] DELETE	1.1 TITLE	[ ] Change [ ] Addition
NAME	William Carter	1.2 NAME	
STREET ADDRESS	116 Wynnwood Circle	1.3 STREET ADDRESS	
CITY-ST-ZIP	Midland City, AL 36350	1.4 CITY-ST-ZIP	
TITLE	Vice President [ ] DELETE	2.1 TITLE	[ ] Change [ ] Addition
NAME	Gary Jordan	2.2 NAME	
STREET ADDRESS	200 Fox Run Trail	2.3 STREET ADDRESS	
CITY-ST-ZIP	Dothan, AL 36303	2.4 CITY-ST-ZIP	
TITLE	Secretary [ ] DELETE	3.1 TITLE	[ ] Change [ ] Addition
NAME	Merle Hatfield	3.2 NAME	
STREET ADDRESS	5121 N. Lakewood Dr	3.3 STREET ADDRESS	
CITY-ST-ZIP	Panama City, FL 32404	3.4 CITY-ST-ZIP	
TITLE	Treasurer [ ] DELETE	4.1 TITLE	[ ] Change [ ] Addition
NAME	Jernelle Switzer	4.2 NAME	
STREET ADDRESS	9850 Thomas Dr 10036	4.3 STREET ADDRESS	
CITY-ST-ZIP	Panama City Beach, FL 32408	4.4 CITY-ST-ZIP	
TITLE	Director [ ] DELETE	5.1 TITLE	[ ] Change [ ] Addition
NAME	Ben Scott	5.2 NAME	
STREET ADDRESS	9305 Marshall Drive	5.3 STREET ADDRESS	
CITY-ST-ZIP	Austell, GA 30001	5.4 CITY-ST-ZIP	
TITLE	Director [ ] DELETE	6.1 TITLE	[ ] Change [ ] Addition
NAME	Ray Studdard	6.2 NAME	
STREET ADDRESS	9850 Thomas Dr 10010	6.3 STREET ADDRESS	
CITY-ST-ZIP	Panama City Beach, FL 32408	6.4 CITY-ST-ZIP	

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 am 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: [illegible]
SIGNATURE AND TITLE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E037 (5/98)