## **2003 FOR PROFIT CORPORATION**

## FILED Apr 30, 2003 8:00 am Secretary of State

1, Entity Nan	MENT	-	0042672				(	04-16-200	3 901 79	030 ***	150.00	
Principal Plac 3000 S HWY PANAMA CIT			Malling Address 3000 S HWY 77 SUITE A PANAMA CITY FL 32444									
2. Principal Place of Business			3. Malling Address									
Suite, Apt. #, etc.			Suite, Apt. #, etc.			☐ CHECK HERE IF MAKING CHANGES						_
City & State			City & State			4. FEI NO	/ ()	6672	24	N	pplied For ot Applicable	}
Zip		Country	Zip	Count	ry			tus Desired		8.75 Ad	ditional ed	
	6. Name	and Address of Current R	legistered Agent		Name		and Addre	ss of New Re	gistered A	gent		1
RENNETT	DEBBICK		<del></del>					· <del></del>			·	1
Bennett, Derrick 112 e Third Ct					Street Address	(P.O. Box Nu	mber is No	ot Acceptable)	ı			l
	CITY FL 324	01	•		<del>- ,</del>			<del></del>				1
		•			City		<del></del>	!	FL	Zip Cod	te	1
		submits this statement for red agent.	the purpose of changing its	registere	d office or registe	ered agent, or	both, in th	e State of Flor	ida. I am fa	miliar with,	and accept	
											-	1
SIGNATURE	<u> </u>		And Winds Co.	. 0				:			<del></del> -	}
	Signature, typed o	FEE IS \$150.00	d title if applicable. (NOTE	: Registered	Agent signature require			i ampelop Gior	OATE	ee 6		\ \ \ (
F Afte	Signature, typed of FILE NOW!!! or May 1, 2003	FEE IS \$150.00 3 Fee will be \$550.00		: Registered	Agent signaturé require		Efection (	Campaign Fina	ancing	\$5.0 Added	May Be	} 
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F Afte	Signature, typed of FILE NOW!!! or May 1, 2003	FEE IS \$150.00 3 Fee will be \$550.00	State DIRECTORS	Registered		9.	Election ( Trust Fun		ancing	Added	to Fees	02)
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12. 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 report or supplemental report is true and accurate and that my signature shall have the same legal effect as it made under oath; that I am an officer or director of the corporation of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an produces, with all other title sempowered.

SIGNATURE: