FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(6)

FILED Feb 13 1998 8:00am Secretary of State

Principal PI	ace of Business MILE RD A FL 32534	Mailing Address 1259 W 9 MILE RD PENSACOLA FL 32534				DO NOT WRITE 3. Date Incorporated or Qualified 03/12/1986				
	Place of Business	2a. Mailing Address	2a. Mailing Address			4. FEI Number	·	IA _I	pplied For	
21		26			71-0550491		No	ot Applicable		
Suite, Ar	ot. #, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired		7	Additional	
22 City & State		Cety & State	City & State						equired	
23	laio	· · · · · · · · · · · · · · · · · · ·	28			6. Election Campaign Financing	П	•	May Be	
Zip	Country		Zip Country			Trust Fund Contribution 8. This corporation owes or has pa	id the eve		to Fees	
24	25	29	30			Personal Property Tax due June			Tangible ☐ No	
	9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent					
O'STEEN, HENRY L.					Name					
1	259 W 9 MILE RD		62			ess (P.O. Box Number is Not Acceptate	<u></u>			
P	ENSACOLA FL 32534					oo (i io. Box (tambér to frot / Boopla			j	
				83						
			•	84	City			85 Zip (Code	
							FL	. `		
11. Pursuar office o	nt to the provisions of Sections 607.0 r registered agent, or both, in the Sta	502 and 607.1508, Florida Statu ite of Florida. Such change was	ites, the at authorized	evoc vd b	 named corpo the corporation 	oration submits this statement for the pon's board of directors. I hereby accep	ourpose of	changing it ointment as	is registered	
agent. I	i am familiar with, and accept the obt	igations of, Section 607.0505, Fl	lorida Stati	utes.		, , , , , , , , , , , , , , , , , , , ,	pr. n.o. upp	5/11/11/0/11 DO	, egioto ea	
SIGNATURE	Signature, typed or printed name of registered i	Aug Aug Cate of a condition to the Cate of	II - Decision		nt signature requirec					
12.		ND DIRECTORS	13.	Age	it aignature recomed	ADDITIONS/CHANGES TO OFFIC	DATE CERS AND	DIRECTOR	RS IN 12	
TITLE	PVS	DELETE	1.1 10	'l F		ADDITIONATOR PARTICIPATION OF THE	DE 10 AND	Change	Addition	
NAME	O'STEEN, HENRY L.		1.2 NAME							
STREET ADDRESS		1.3 \$1		1.3 STREET ADDRESS					l d	
CITY-ST-ZIP	PENSACOLA FL 32534			1.4 CITY-ST-ZIP						
TITLE	D	2.1		2.1 TITLE			· · · · · · · · · · · · · · · · · · ·	Change	Addition	
NAME	O'STEEN, HENRY L.		2.2 NA	2.2 NAME					ł	
STREET ADDRESS			2.3 ST		ADDRESS					
CITY-ST-ZIP	PENSACOLA FL 32534	2.4 C(T- ZIP					
TITLE	STD O'STEEN, BONNIE H.	DELETE		3.1 TITLE				☐ Change	Addition	
NAME	40E0 M A MILE DD		3.2 NA							
STREET ADDRESS	PENSACOLA FL 32534		3.3 STREET ADDRESS 3.4. CITY-ST-ZIP						1	
CITY-ST-ZIP TITLE	TENONOCENTE 32334	V-1.			1 - ZIP		··· · · · ···	Change	Addition	
NAME		□ nerest	4.1 TIT					☐ Change	☐ Addition	
STREET ADDRESS					unnarce.					
CATY-ST-ZIP	'		4.3 STREET 4.4 City-S						•	
TITLE		DELETE	5.1 TiT		- 11r			Change	Addition	
NAME			5.2 NA							
STREET ADDRESS					ADDRESS					
CITY-ST-ZIP			5.4 CIT							
TITLE				TITLE				Change	Addition	
NAME			6.2 NA	ME				•		
STREET ADDRESS	s 		6 3 STR	REET A	DDRESS					
CITY-ST-ZIP	<u> </u>		6.4 CH		1					
14 I herehy	certify that the information supplied	with this filing does not qualify for	or the ever	moti	on stated in Se	ection 119 07/3Vi) Florida Statutes 1	further co	difuthat the	intermetion	

indicated on this annual report or supplied with 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 program in trustee on powered to expedit this report as Tequired by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an additional with an address.