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Mar 25 1997 8:00am
Secretary of State

PROFIT CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P25827 (7)
1. Corporation Name
HOPETON DEVELOPMENT CORPORATION



Principal Place of Business Mailing Address
100 FIRST ST. 100 FIRST ST.
P.O. BOX 351 P.O. BOX 351
SEA ISLAND GA 31581 SEA ISLAND GA 31581

3. Date Incorporated or Qualified 08/30/1989 3a. Date of Last Report 06/24/1996
4. FEI Number 59-2673329 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
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip Country 28 Zip Country
24 25 29 30

9. Name and Address of Current Registered Agent
DAWSON, GREGORY M.
MAHONEY, ADAMS, MILAM, SURFACE & GRIMSLEY
100 LAURA ST., 8TH FLOOR
JACKSONVILLE FL 32201

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE (NOTE: Registered Agent signature required when reinstating) DATE

Table with 12 columns for Officers and Directors and 13 columns for Additions/Changes to Officers and Directors. Includes fields for Title, Name, Street Address, City, State, and Zip.

14. I do hereby certify that the information supplied with this form 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: [Signature] 3/20/97 912-638-5158
A. W. Jones DATE OF SIGNING OFFICER OR DIRECTOR

CR2E034 (9/96)