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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000015198 (3)

FILED Feb 18 1998 8:00am Secretary of State

1. Corporation	LROY COMPANY OF SAND	DESTIN, INC.			4 (188) 6 (18) 1 (18) 6 (8) 4 (8) 4 (8) 4
Principal Place	e of Business	Mailing Address		{	I HIDDI DIVIZI KIDIR IDIRA IZIL KODI
9535 HWY. 98 WEST DESTIN FL 32541		9535 HWY. 98 WEST DESTIN FL 32541		DO NOT WRITE IN TH	IIS SPACE
				3. Date Incorporated or Qualified	113 SFACE
				02/23/1993	
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		59-3167366	Not Applicable
Suite, Apt	#, etc.	Suite, Apt. #, etc.		6. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	Ð	City & State	• · · · · · · · · · · · · · · · · · · ·	6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the	
24	25		10	Personal Property Tax due June 30.	Yes No
	9, Name and Address of Curre	nt Hegistered Agent	81 Name	10. Name and Address of New Register	ed Agent
	EN, DAVID A		oi ivanie		
743 HIGHWAY 98 EAST			82 Street Addre	ess (P.O. Box Number is Not Acceptable)	
SUITE 5			83		
DE	STIN FL 32541		63		
			84 City		85 Zip Code
44 Pureuant t	to the provisions of Sections 607 050	2 and 607 1508 Florida Statutes	the above named corn	oration submits this statement for the purpos	
office or re	egi ste red agent, or both, in the State	e of Florida. Such change was au	thorized by the corporati	on's board of directors. I hereby accept the	appointment as registered
•	m lamiliar with, and accept the oblig	ations of, Section 607.0505, Flori	da Statutes.		
SIGNATURE	Signature, typed or pointed name of registered ag-	ent and title if applicable (NOTE:	Registered Agent signature require	d when reinstating) DAT	<u> </u>
12.		D DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	AND DIRECTORS IN 12
TITLE	PS	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	Lawson, Geraldine Q		1.2 NAME		
STREET ADDRESS	18795 HWY 331 S		1.3 STREET ADDRESS		
CITY-ST-ZIP	FREEPORT FL 32439		1,4 CITY-ST-ZIP		
TITLE	VP.	☐ DELETE	2.1 TITLE		Change Addition
NAME	LAWSON, CHARLES		2.2 NAME		
STREET ADDRESS	18795 HWY 331 S		2.3 STREET ADDRESS		
CITY-ST-ZIP	FREEPORT FL 32439		2. 4 CiTY-ST-ZiP		
TITLE	S CHATRA CURRETIMA	☐ DELE te	3.1 TITLE		Change Addition
NAME	SINATRA, CHRISTINA 37 E BRADLEY		3.2 NAME		
STREET ADDRESS	DESTIN FL 32541		3.3 STREET ADDRESS		
CITY-ST-ZIP	DESTIN FL 32041	☐ DELET E	3.4. CITY-ST-ZIP		Change Addition
TITLE		☐ pereie	4.1 TITLE		Change Addition
NAME STREET ADDRESS			4. 2 NAME 4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY - ST - ZIP		
	ertify that the information supplied w	ith this filing dees not qualify for		Section 119.07(3)(i), Florida Statutes. I further	certify that the information

curate and that my signature shall have the same legal effect as if made under oath; that I am an execute this report as required by Chapter 607, Florida Statules; and that my name appears in indicated on this annual report or edipplement officer or director of the corporation or the re Block 12 or Block 13 if changed, or on a rati