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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

<u>1998</u>

DOCUMENT # P93000025118 (9)

EMERALD COAST REALTY OF HOTELIER INC.

FILED
May 21 1998 8:00am
Secretary of State



Principal Place of Business Mailing Address 34880 EMERALD COAST PKWY 34880 EMERALD COAST PKWY **DESTIN FL 32541** DESTIN FL 32541 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 04/05/1993 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For دسم<u>59-31768</u>57 Emerald Coast 35008 35008 Emerald Coast IN Not Applicable \$8.75 Additional 5. Certificate of Status Desired 401 401 Fee Required City & State City & State \$5.00 May Be 6. Election Campaign Financing Destin Destin 23 Trust Fund Contribution Added to Fees Country Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes 24 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 KEMPER PLUMMER, CLARA Name 34880 EMERALD COAST PKWY 82 Street Address (P.O. Box Number is Not Acceptable) DESTIN FL 32541 83 84 City 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. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607 0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and lifte if applicable (NOTE Registered Agent signature required when roinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE 1.1 101.6 Change TITLE KEMPER PLUMMER, CLARA NAME 1.2 NAME 34880 EMERALD COAST PKWY STREET ADDRESS 1.3 STREET ADDRESS **DESTIN FL** CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Addition TITLE 2.1 1011.0 Change FORBES, JAMIE V NAME 2.2 NAME 144 COUNTRY CLUB DR. WEST STREET ADDRESS 2.3 STREET ADDRESS DESTIN FL 32541 CITY-ST-ZIP 2. 4 CITY-ST-ZIP □ DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-7IP 4.4 CITY-ST-ZIP DELETE 5.1 TITLE Change Addition TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CHY - ST - ZIP DELETE Change Addition TITLE 61 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY - ST - ZIP

14. Thereby 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 required or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed, or on an attachment with an address.

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950-837 400