

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



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

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS**

95 MAY -1 PM 1:33

DOCUMENT # P93000025218 (7)

1. Corporation Name

A & G PROPERTIES OF NORTHWEST FLORIDA, INC.

Principal Place of Business

**506 HWY 98E
DESTIN FL 32541**

Mailing Address

**506 HWY 98E
DESTIN FL 32541**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/05/1993

3a. Date of Last Report

05/01/1994

4. FEI Number

59-3173423

Applied For

Not Applicable

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

24

Country

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

29

Country

30

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐

**\$5.00 May Be
Added to Fees**

9. This corporation has liability for intangible tax under S. 190.032,
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

**ABBOTT, STEPHEN J
506 HWY 98E
DESTIN FL 32541**

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

(Signature typed in Block 12, if registered agent, and Block 13, if agent of record)

(Signature typed in Block 10, if registered agent, and Block 11, if agent of record)

Date

12. OFFICERS AND DIRECTORS

12.1

NAME

STREET ADDRESS

CITY, ST, ZIP

**D
ABBOTT, STEPHEN J
506 HWY 98E
DESTIN FL 32541**

12.2

NAME

STREET ADDRESS

CITY, ST, ZIP

**D
GUSTIN, JOHN C III
121 HART
NICEVILLE FL 32578**

12.3

NAME

STREET ADDRESS

CITY, ST, ZIP

**D
BARTON, JAMES L
121 HART
NICEVILLE FL 32578**

12.4

NAME

STREET ADDRESS

CITY, ST, ZIP

12.5

NAME

STREET ADDRESS

CITY, ST, ZIP

12.6

NAME

STREET ADDRESS

CITY, ST, ZIP

12.7

NAME

STREET ADDRESS

CITY, ST, ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

13.1

NAME

STREET ADDRESS

CITY, ST, ZIP

☐ Change ☐ Addition

13.2

NAME

STREET ADDRESS

CITY, ST, ZIP

☐ Change ☐ Addition

13.3

NAME

STREET ADDRESS

CITY, ST, ZIP

☐ Change ☐ Addition

13.4

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☐ Change ☐ Addition

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NAME

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CITY, ST, ZIP

☐ Change ☐ Addition

13.6

NAME

STREET ADDRESS

CITY, ST, ZIP

☐ Change ☐ Addition

13.7

NAME

STREET ADDRESS

CITY, ST, ZIP

☐ Change ☐ Addition

14. I, the undersigned, certify that the information supplied with this filing is substantially true and correct and that the corporation is in good standing for the purposes stated in Section 110.032(1)(a), Florida Statutes. I further certify that the information included 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. I am an officer or director of the corporation or the person or persons 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:

John C. Gustin III
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
JOHN C. GUSTIN III

4.20.95

Date

904-678-5141

Contact Person