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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1996

DOCUMENT #

P93000053318 (0)

1. Corporation	i Name	•	•		
NAS K	ART PARK, INC.			1 18841881 HIS 18788 NIGH 88117 8817	NA MANNA MANNA BUNNA KUNNA KANNA SANNA MANA
Principal Place	of Business	Mailing Address	/A		
,					
37 PRYOR R	ru se T Beach Road	37 PRYOR RD SE FT. WALTON BCH, FL :	22540		
PANAMA CIT		71. WALION SOII, TE	J2.J40		
US				3. Date Incorporated or Qualified	3a. Date of Last Report
2. Principal Pla	ace of Business	2a. Mailing Address		07/27/1993 4. FEI Number	05/01/1995
	8 Front Beach Rd		9001	55-0173909	Applied For Not Applicable
Suite, Apt. #		Suite, Apt. #, etc.			\$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & State	ma City FL	City & State	ty Brack F	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be
Zip	Country	Zip	Country	This corporation has liability for	Added to Fees
24 354	13 25 BAY	29 32419	30 BAY		Filangiole tax tirider's 199.032,
	9. Name and Address of Current I	Registered Agent		10. Name and Address of New F	Registered Agent
81 Name Steve Wray					Y POP I MAI A MAAA AAAA AAAA AAAA AAAA AAAA
WRAY, STEVE 82 Street Address				address (P.O. Box Number is Not Acceptate	ole)
824 LINDA DRIVE			24 BEACH DOOD	٤ '	
MARY ESTHER FL 32569			83		
			84 City		85 Zip Code
Vanae				nama City Beach	FL 85 Zip Code 3240つ
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 off or registered agent, or botty, 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, Segriph 607.0505, Florida Statutes.					
	in, and accept the conganions of, so with	1 607 .0505, Florida Statutes.		1	Play 240 1996
SIGNATURE	Signature, typect or printed name of registered agent and	d the if ancircable (NOT)	:: Flegistered Agent signature re	quired when roinstating)	Jug 2 1116
12.	OFFICERS AND I	<u>-</u>	13.	ADDITIONS/CHANGES TO OFF	ICERS AND DIRECTORS IN 12
TITLE	D	DELETE	1. 1 TITLE	President	Change Addition
NAME	WRAY, STEVE		1.2 NAME	6424 BEACH Dis	_
STREET ADDRESS	824 LINDA DR		1.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	MARY ESTHER FL 32569	DELETE	1 4 C!TY-ST-ZIP	Panama City Beach	1,FL 33401
NAME	D Patterson, William A	(X) percie	2 1 TITLE	·	Change Addition
STREET ADDRESS	31 COURT DR		2 2 NAME		
CITY-ST-ZIP	DESTIN FL 32541		2 3 STREET ADDRESS 2 4 CHY-ST-ZIP		
TITLE	DECIMILE SECTI	[] DELETE	3 1 TITLE		Change Addition
NAME		_	3 2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3 4 CITY - ST - ZIP		
TITLE		☐ DELETE	. 4 1 TITLE		Change Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY - ST - ZIP		
TITLE		☐ DELETE	5 1 TITLE		Change Addition
NAME			52 NAME		
STREET ADDRESS			5 3 STREET ADDRESS		
CITY-ST-ZIP		EN OFFICE	54 CITY-ST-ZIP		
TITLE		DELETE	6 1 TITLE		Change Addition
NAME			6.2 NAME.		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 chapted, or on an attachment with an address.

63 STREET ADDRESS

64 CHTY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

ATLUM LA MANAGER AND TOPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

May 2 1996 (904) 233-5855

CR2E034 (12/95)