

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

FILED

Mar 19 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Northam Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P93000054700 (8)

1. Corporation Name  
TERRY PARISH INC.

Principal Place of Business  
1685 GLENBURN CT.  
NICEVILLE FL 32578

Mailing Address  
1685 GLENBURN CT.  
NICEVILLE FL 32578



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 1491 18th Street Suite, Apt. #, etc. 22 City & State 23 Niceville FL 24 Zip 32578 25 Country		2a. Mailing Address 26 P. O. Box 4064 Suite, Apt. #, etc. 27 City & State 28 Ft. Walton Bch FL 29 Zip 32549 30 Country		3. Date incorporated or Qualified 08/02/1993	
				4. FEI Number 59-3193456 <input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
				5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
				6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent PARISH, TERRY W 1685 GLENBURN CT. NICEVILLE FL 32578				10. Name and Address of New Registered Agent 81 Name 82 Terry W. Parish 83 Street Address (P.O. Box Number is Not Acceptable) 1491 18th Street 84 City Niceville FL 85 Zip Code 32578			
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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:  Terry W. Parish, President 3/15/98  
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P PARISH, TERRY 1685 GLENBURN CT NICEVILLE FL CITY-ST-ZIP	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		1.2 NAME	
STREET ADDRESS		1.3 STREET ADDRESS	
CITY-ST-ZIP		1.4 CITY-ST-ZIP	
TITLE	V BURNHAM, CURTIS 1685 GLENBURN CT NICEVILLE FL CITY-ST-ZIP	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	T BURNHAM, JIMMY 1685 GLENBURN CT NICEVILLE FL CITY-ST-ZIP	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	S SIMON ELLERD 1685 GLENBURN CT. NICEVILLE FL CITY-ST-ZIP	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I hereby 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 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:

 Terry W. Parish 3/15/98 (607) 608-7823

CR2E034 (10/97)