

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Mar 30, 1999 8:00 am
Secretary of State

03-30-1999 90027 025 ***150.00

DOCUMENT # P93000066912

1. Corporation Name
G N K DEVELOPMENT, INC.

Principal Place of Business
504 VAN BUREN STREET
FT. WALTON BEACH FL 33547
US

Mailing Address
504 VAN BUREN STREET
FT. WALTON BEACH FL 32541
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
09/20/1993

4. FEI Number
59-3211622

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐ \$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☐ Yes ☐ No

10. Name and Address of New Registered Agent

2. Principal Place of Business
21 915 Beachview Drive
Suite, Apt. #, etc.

2a. Mailing Address
26 915 Beachview Drive
Suite, Apt. #, etc.

22 City & State
23 Ft Walton Beach, FL

27 City & State
28 Ft Walton Beach, FL

24 Zip 32947 25 Country Okaloosa

29 Zip 32947 30 Country Okaloosa

9. Name and Address of Current Registered Agent

SAVAGE, RUSSELL (DOC)
504 VAN BUREN STREET
FORT WALTON BEACH FL 32547

81 Name Laurie Hutchens
82 Street Address (P.O. Box Number is Not Acceptable)
915 Beachview Drive

83

84 City Ft Walton Beach FL 85 Zip Code 32547

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 Laurie Hutchens
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

3-25-99

12. OFFICERS AND DIRECTORS

TITLE PVP
NAME SAVAGE, RUSSELL (DOC)
STREET ADDRESS 504 VAN BUREN STREET
CITY-ST-ZIP FT. WALTON BEACH FL ☒ DELETE

TITLE T
NAME WALL, KEITH
STREET ADDRESS 3468 SHORELINE CIRCLE
CITY-ST-ZIP PALM HARBOR FL ☐ DELETE

TITLE S
NAME HUTCHENS, LAURIE
STREET ADDRESS 915 BEACHVIEW DRIVE
CITY-ST-ZIP FORT WALTON BEACH FL ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE President
1.2 NAME Keith Wall
1.3 STREET ADDRESS 915 Beachview Dr
1.4 CITY-ST-ZIP Ft Walton Beach, FL 32547 ☒ Change ☐ Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP ☐ Change ☐ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP ☐ Change ☐ Addition

4.1 TITLE Vice President
4.2 NAME Laurie Hutchens
4.3 STREET ADDRESS 915 Beachview Drive
4.4 CITY-ST-ZIP Ft Walton Beach, FL 32547 ☐ Change ☒ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP ☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP ☐ Change ☐ Addition

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, with all other like empowered.

SIGNATURE: Laurie Hutchens
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/25/99

Date

(800) 862-2944

Daytime Phone #

CR2E034 (1/98)