## 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

Principal Place of Business	DOCUMENT # P9300067838 (1)  JADE EAST TOWERS I, INC.						
	Principal Place of Business M				- I IQDIHADI HA IDIDA UHUI DAHA DAH	<u>ii 00:11 00:110 01:11: 10:001 10:000 11:01 10:11 10:01</u>	
277-A AZALEA DRIVE DESTIN FL 32541		POST OFFICE BOX 14 DESTIN FL 32540	124				
					3. Date Incorporated or Qualified 09/21/1993	3a. Date of Last Report 05/01/1995	
2. Principal Place of Busine	· · · · · · · · · · · · · · · · · · ·	2a. Mailing Address			4. FEI Number	Applied For	
21 26 Suite Apt. #, etc		Suite, Apt. #, etc.			59-3209195	Not Applicable <b>\$8.75</b> Additional	
Suite, Apr. #, etc	2	27			5. Certificate of Status Desired	Fee Required	
City & State		Oty & State			6. Election Campaign Financing	\$5.00 May Be	
23		28	Countr		Trust Fund Contribution  8. This corporation has liability for	Added to Fees	
Zip :	Country 25	Zip [ <b>9</b> ]	30	,		No	
	and Address of Current Re			7	10. Name and Address of New F	Registered Agent	
BURKE, LES W 221 MCKENZIE AVE PANAMA CITY FL 32401			81	Name			
			82	Street Addr	ess (P.O. Box Number is Not Acceptat	ole)	
			83				
						Inc. 7: Codo	
			84	City		FL 85 Zip Code	
SIGNATURESignature_type=1/	or porte amen e of regulered agreef and t OFFICERS AND DI	RECTORS	o't Ergetesd Ag 13.	ant signadore de pare		DATE FICERS AND DIRECTORS IN 12	
TITLE		☐ DELETE	1. 1 TITLE			Change Addition	
	S, J. RON		1.2 NAME	1			
	DX 1424 -N/A I FL 32540		1 4 CiTy -	FLADORESS ST. 7IP			
TITLE UESTIN	II L JEJTU	DELFTE	2 1 7 7 1			Change Addition	
NAME			2.2 NAME				
STREET ADDRESS				T ADDRESS			
CITY - ST - ZIP		DELETE	2.4 CITY 3.1 Tillet			Change Addition	
TITLE NAME			3 2 NAME				
STREET ADDRESS				ET ADDRESS			
CITY -ST - ZIP			3.4 CITY	ST-ZIP			
TITLE		☐ DELETE	4 Tillei			Change Addition	
NAME			4.2 NAM	1			
STREET ADDRESS			4 3 STRE	F1 ADDRESS			
CITY ST-ZIP		☐ DELFTE	5 1 TiTu			Change Addition	
NAME		_	5.2 NAMI				
STREET ADDRESS			5.3 STRE	ET ADDRESS			
			5.4 CITY				
C(TY - ST - ZIP		☐ DELETE	6 1 TITL	1		Change Addition	
CITY-ST-ZIP TITLE							
TITLE NAME			6.2 NAM				
TITLE				ET ADDRESS			

SIGNATURE:

SIGNATURE AND TYPES OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)