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

**PROFIT CORPORATION ANNUAL REPORT** 

1998

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

TITLE

NAME



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

ii corporat	TH HARBOUR LANDING, I		(0)				
Principal Place of Business Mailing Address						i sealiddt lin inna istil dalli skill skill skill skill	aldı ifilik bilêl filbi isli izdi
2708 HIGHWAY 77 PANAMA CITY FL 32405 US		2708 HIGHWAY 77 Panama City FL 32405 US			DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified		SPACE
						01/03/1994	
2. Principal	Place of Business	2a. Mailing Addre	Mailing Address			4. FEI Number	Applied For
21		26				59-3224256	Not Applicable
Suite, Ap	it. #, etc.	Suite, Apt. #,	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State				6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
, Zip	Country				8. This corporation owes or has paid the c		
24	26	29	30			Personal Property Tax due June 30.	Yes No
	9. Name and Address of Cu HUMPHREY, JANIS M	rrent Registered Agent		81	Name	10. Name and Address of New Registered	l Agent
2703 HIGHWAY 77 PANAMA CITY FL 32405				82 Street Address (P.O. Box Number is Not Acceptable) 83			
				84		F	
11. Pursuar office or agent. I	nt to the provisions of Sections 607 r registered agent, or both, in the S am familiar with, and accept the o	.0502 and 607.1508, Florid State of Florida. Such chang obligations of, Section 607.0	a Statutes, the a ge was authorize 505, Florida Sta	bove d by tutes	named cor the corpora	poration submits this statement for the purpose ation's board of directors. I hereby accept the ap	of changing its registered pointment as registered
SIGNATURE							
12.	Signature, typod or printed name of registers	S AND DIRECTORS	(NOTE Registere	d Age	nt signature requ	DATE  ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTORS IN 12
TITLE	T P		DELETE 1.1 TITLE			ADDITIONS/OFFICERS AF	Change Addition
NAME	COMMANDER, CHARLES W			1.2 NAME			
STREET ADORESS	ARAA AMALIKATA MIN			1.3 STREET ADDRESS			
CITY-ST-ZIP	PANAMA CITY FL 32405			1.4 CITY - ST - ZIP			
TITLE	D			2.1 TITLE			Change Addition
NAME	HUMPHREY, JANIS M		2.2				
STREET ADDRESS	OTON LUCIAL ME		2.3 \$	TREET	ADDRESS		
CITY-ST-ZIP	PANAMA CITY FL 32405		2.40	ony-s	ST-ZIP		
TITLE		☐ DEI	LETE 3.1 T	ITLE			Change Addition
NAME	1		3.2 N	AME			
STREET ADDRESS	s <b> </b>		3.3 S	TREET	ADDRESS		

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 cythologic or gri an attachment with an address.

3.4. CITY-ST-ZIP

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

4.4 CITY-ST-ZIP

4.1 TITLE

4. 2 NAME

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

DELETE

DELETE

DELETE

☐ Change

Change

Addition

Addition

**FILED** 

Apr 13 1998 8:00am

Secretary of State