

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

CORPORATION ANNUAL REPORT 1995		FLORIDA DEPARTMENT OF STATE Sandra B. Norman Secretary of State DIVISION OF CORPORATIONS
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FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
 95 MAY -1 PM 1:55

DOCUMENT # P94000030861 (6)

1. Corporation Name

CORDOVA ENTERTAINMENT, INC.

Principal Place of Business

**417 E VIRGINIA ST
SUITE 1
TALLAHASSEE FL 32301**

Mailing Address

**195 E FAIRFIELD DR
PENSACOLA FL 32503**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/22/1994

3a. Date of Last Report

2. Principal Place of Business

21

2a. Mailing Address

26

316 S. Baylen

4. FEI Number

59 323 7932

Applied For

Not Applicable

**\$8.75 Additional
Fee Required**

5. Certificate of Status Desired

☐

6. Election Campaign Financing
Trust Fund Contribution

☐

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for registration fees under S. 100.032,
Florida Statutes ☐ Yes ☒ No

Suite, Apt. #, etc.

22

Suite, Apt. #, etc.

27

Box 100

City & State

23

City & State

28

Pensacola

Zip

24

County

25

Zip

29

FL 32501

Country

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**CAPITAL CONNECTION, INC.
417 E VIRGINIA ST
SUITE 1
TALLAHASSEE FL 32301**

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83.

84. City

FL

85. Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1503, 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

(Signature of Agent or New Agent, if Agent is not the registered agent, then the corporation)

(Signature of Agent or New Agent, if Agent is not the registered agent, then the corporation)

(Signature of Agent or New Agent, if Agent is not the registered agent, then the corporation)

12. OFFICERS AND DIRECTORS

OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE

D

NAME

**BRANNEN, DAVID A
195 E FAIRFIELD DR
PENSACOLA FL 32503**

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY & ZIP

**316 S. Baylen, Box 100
Pensacola FL 32501**

☒ Change ☐ Addition

2. TITLE

NAME

STREET ADDRESS

CITY & ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY & ZIP

☐ Change ☐ Addition

3. TITLE

NAME

STREET ADDRESS

CITY & ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY & ZIP

☐ Change ☐ Addition

4. TITLE

NAME

STREET ADDRESS

CITY & ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY & ZIP

☐ Change ☐ Addition

5. TITLE

NAME

STREET ADDRESS

CITY & ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY & ZIP

☐ Change ☐ Addition

6. TITLE

NAME

STREET ADDRESS

CITY & ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY & ZIP

☐ Change ☐ Addition

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 119.02(1)(b), Florida Statutes. I further certify that the information submitted 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 liquidator empowered to reconcile this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 of Block 13 if changed, or as an alternate with an address.

SIGNATURE:

David A. Brannen
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DAVID A. BRANNEN

4/24/95

904 434-7700