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**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

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Feb 18 1997 8:00am

Secretary of State

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P94000032160 (1)

CBD OF NW FL, INC.

Principal Place of Business

350000 EMERALD COAST PKWY

information indicated on this annual rep Lam an officer or director of the cor-appears in Block 12 or Block 13 if c

SIGNATURE:

US	US							
	<del>" -</del>				3. Date Incorporat 04/28/1994	ed or Qualified	3a. Date of La 01/25/199	•
2. Principal Place of Business		Mailing Address			4. FEI Number			Applied For
21	26				59-323919	5	·	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of St	atus Desirad	<b>58.7</b>	5 Additional
22					b. Certificate of St	aius izesireo	Fe-	e Required
City & State	(	ity & State			6. Election Campa	ign Financing	<b>\$</b> 5.	QQ May Be
23	28				Trust Fund Con	tribution		led to Fees
Zip C	ountry 2	?ip	Cour	ntry	B. This corporation	n has liability for in	ntangible tax und	er s. 199.032,
25	29		30		Florida Statutes	_	Yes No	
9. Name and /	Address of Current Registe	red Agent	I		10. Name and Ado	iress of New Reg	lstered Agent	
SEYMOUR, EDWARD	DH			81 Name				
35000 EMERALD CO	DAST PARKWAY		ļ-:	82 Street Ad	ddeas (D.O. Day Myrcha	in that the annual line		·
DESTIN FL 32541			[	Street At	ddress (P.O. Box Number	is Not Acceptabl	e)	
			ļ.	83			******************************	,
			L					
			Ţ.	84 City			FL 85	Zip Code
44 5	10-1	1500 Fin-id- Out						
<ol><li>Pursuant to the provisions of office or registered agent, o</li></ol>	r Sections 607.0502 and 607 r both, in the State of Florida	'. 1506, Florida Statu - Such change was	ites, the ab authorized	ove-named c I by the corno	orporation submits this st reation's board of director	atement for the pi s. I hereby accen	urpose of changii I the annointmen	ng its registered Las registered
agent. I am familiar with, and	d accept the obligations of.	Section 607.0505, F	lorida Statu	ites.		o	t in exponential	t do rogrotoro
SIGNATURE								
Signature, typed or print	ed name of registered agent and title 4		TE: Registered	Agent signature re	equired when re-nstating)		DATE	
12.	OFFICERS AND DIRECT		13.		ADDITIONS/CHA	NGES TO OFFIC		
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	IAM W							
			1.2 NA	ME				
AFOOD FLIFTOL	LD COAST PARKWAY		1	ME Reet Address				
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STREET ADDRESS CITY-ST-ZIP  35000 EMERA DESTIN FL		DELETE	1.3 STF 1.4 CIT	HEET ADDRESS Y-ST-ZIP		··· • • • • • • • • • • • • • • • • • •	☐ Char	nge [] Addition
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