

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

FILED
Feb 06 1996 8:00 am
Secretary of State

DOCUMENT # P94000036367 (8)

1. Corporation Name

FT. WALTON BEACH INVESTMENTS, INC.

Principal Place of Business

Mailing Address

913 GULF BREEZE PKWY., #14
GULF BREEZE FL 32561

913 GULF BREEZE PKWY., #14
GULF BREEZE FL 32561

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24 25

29 30

9. Name and Address of Current Registered Agent

MAGGIO, R. BRENT
~~907 PARKER DR~~ 211 Sabine Dr.
PENSACOLA BEACH FL 32561

3. Date Incorporated or Qualified

05/09/1994

3a. Date of Last Report

01/27/1995

4. FCI Number

59-3243484

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 has liability for intangible tax under s. 199.032,
Florida Statutes.

☒ Yes

☐ No

10. Name and Address of New Registered Agent

81 Name

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

211 Sabine Dr.

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0505 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

Signature of the person making this statement

Signature of the person making this statement

DATE

12. OFFICERS AND DIRECTORS

1. TITLE P
2. NAME MAGGIO, R. BRENT
3. STREET ADDRESS ~~907 PARKER DR~~ 211 Sabine Dr.
4. CITY, ST, ZIP PENSACOLA BEACH FL 32561

☐ DELETE

5. TITLE
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SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

R. Brent Maggio

1/16/96

904-934-2810

CR2E034 (12/95)