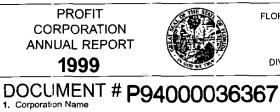
FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999

FT. WALTON BEACH INVESTMENTS, INC.



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Apr 26 1999 8:00 am Secretary of State

|--|--|--|--|

Principal Place	of Business	Mailing Address					
226 PALAFOX PL	ACE-	226 PALAFOX PALOE					
ORD FLOOR		SRD FLOOR			DO NOT WRITE I	IN THIS SPACE	
Pensacola LF 3230 1 - Pensacola FL 32501 US US				3. Date Incorporated or Qualifed			
-		00			05/09/1994		{
2 Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number		Appl ed For
	Gardengate Circle	1	سل	Cinala.		1	Not Applicable
21 909 Suite, Act.		26 909 Gardens	ate	CIVELE	_	\$8.7	5 Acditional
	#, etc.			-	5. Certifcate of Status Desired	•	Required
City & State		City & State			& Election Compaign Financing		0 Nay Be
— ~	ومسر	└ -′	54		6. Election Campaign Financing Trust F and Contribution		d to Fees
23 Pensa	COIA, FL	28 Pensacola, F	Count	nv.	8. This corporation owes the current		
Zip 3250			_	16	Person al Property Tax.	Yes	[]No
24 3250	9. Name and Address of Current		<u> </u>		10. Name and Address of New Regi		
	5. Name and Address of Current	Registered Agent	- 8	1 Name			
MAGG	GIO, R. BRENT					 	
	ABINE DRIVE		Je	Street Ad:	dress (P.O. Box Number is Not Acceptable)	J
	ACOLA BEACH FL 32561		-	13			
, 2,10	7,000,000,000		"	~			
			8	4 City		85 Z	ip Code
						FL °	100 000 000 000
office or r	edictored agent or both in the State o	f Florida. Such change was auth	oorized t	ov the comorat	rporation submits this statement for the pur tion's board of cirectors. I hereby accept th	rpose → cnanging ne appointment as	registered
agent. a	m familiar with, and accept the obligati	ons of, Section 607.0505, Florid	a Statut	es.	•		
SIGNATURE							
	Signature, typed or printed name of registered agent			gent signature requ		DATE NO DIDEC	TOE 9 IN 42
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFIC	Chang	
TITLE	P	☐ DELETE	1.1 TITLE				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	MAGGIO, R. BRENT		1.2 NAM				
STREET ADDRESS	211 SABINE DRIVE		1.3 STRE	EET ADDRESS			
CITY-ST-ZIP	PENSACOLA BEACH FL		ŧ	-ST-ZIP			- [] Addition
TITLE		☐ DELETE	2.1 TITLE	E		Chang	ge 🗌 Addition
NAME			2.2 NAM	E			
STREET ADDRESS			2.3 STR	EET ADDRESS			
CITY-ST-ZIP			2. 4 CITY	Y-ST-ZIP			
TITLE		☐ DELETE	3.1 TITLI	E.		Chang	ge 🗌 Addition
NAME			3.2 NAM	E			
STREET ADDRESS			3.3 STR	EET ADDRESS			
CITY-ST-ZIP			3.4, CITY	Y-ST-ZIP			
TITLE		☐ DELETE	4,1 TITL	E		☐ Chang	ge 🗌 Addition 🛭
NAME			4. 2 NAM	ΛE			
STREET ADDRESS			4.3 STRI	EET ADDRESS			
CITY-ST-ZIP				-ST-ZIP			
TITLE		☐ DELETE	5,1 TITLI			Chang	ge Addition
NAME			5.2 NAM	E			
STREET ADDRESS			5.3 STRI	EET ADDRESS			
				-ST-ZIP			
CITY-ST-ZIP TITLE		☐ DELETE	6.1 TITL			Chang	ge Addition
1			6.2 NAM				_
NAME	}			EET ADDRESS			
STREET ADDRESS				- 1			
CITY-ST-ZIP			6.4 CITY	'-ST-ZIP			

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.0 (3)(i), Florida Statutes. I further sertify that the information indicated on this annual report of 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 of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changes or an an attachment with an aridress, with all other like empowered.

SIGNATURE:

SIGNING OFFICER OR DIRECTOR

02/16/99

CR2E034 (11/98)