

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

PROFIT CORPORATION  
ANNUAL REPORT  
1998



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

DOCUMENT # **P94000039305 (5)**

1. Corporation Name  
**CABANA CAFE, INC.**

Principal Place of Business  
**2378 HWY 98 EAST  
DESTIN FL 32541  
US**

Mailing Address  
**P. O. BOX 99  
DESTIN FL 32540-0099  
US**

**FILED**  
**May 15 1998 8:00am**  
**Secretary of State**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address
21 State (App. No. 1)	26 State (App. No. 1)
22 City & State	27 City & State
23 Zip	28 Zip
24 Country	29 Country
25 Country	30 Country

3. Date Incorporated or Qualified  
**05/20/1994**

4. FEI Number  
**59-3292901**

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 owes or has paid the current year Intangible Personal Property Tax due June 30  Yes  No

10. Name and Address of New Registered Agent

9. Name and Address of Current Registered Agent

~~GRIMSLEY, JAMES W~~  
~~25 WALTER MARTIN RD NE~~  
~~FT WALTON BEACH FL 32548~~

81 Name **THOMAS E. KRANZ**  
82 Street Address (P.O. Box Number is Not Acceptable)  
**1241 Airport Rd.**  
83  
84 City **DESTIN** FL 85 Zip Code **32541**

11. Pursuant to the provisions of sections 607.01 and 607.02, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office to principal place of business 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 provisions of Section 607.02(9)(b), Florida Statutes.

SIGNATURE *Thomas E. Kranz* VP - CFO 4/30/98

12. OFFICERS AND DIRECTORS

12.1 OFF	<del>SDT</del>	<input checked="" type="checkbox"/> DELETE
12.2 NAME	<del>GRIMSLEY, JAMES W</del>	
12.3 STREET ADDRESS	<del>25 WALTER MARTIN RD NE</del>	
12.4 CITY, ST, ZIP	<del>FT WALTON BEACH FL</del>	
12.5 OFF	<del>DP</del>	<input checked="" type="checkbox"/> DELETE
12.6 NAME	<del>BONEZZI, ROBERT A</del>	
12.7 STREET ADDRESS	<del>110 S PALMETTO</del>	
12.8 CITY, ST, ZIP	<del>DESTIN FL</del>	
12.9 OFF	VO	<input type="checkbox"/> DELETE
12.10 NAME	COBB, HENRY H. JR.	
12.11 STREET ADDRESS	30 CROSS CREEK PARK	
12.12 CITY, ST, ZIP	BIRMINGHAM AL	
12.13 OFF	D	<input type="checkbox"/> DELETE
12.14 NAME	MEYER, MICHAEL P.	
12.15 STREET ADDRESS	101 ELLIS ROAD	
12.16 CITY, ST, ZIP	DESTIN FL	
12.17 OFF		<input type="checkbox"/> DELETE
12.18 NAME		
12.19 STREET ADDRESS		
12.20 CITY, ST, ZIP		
12.21 OFF		<input type="checkbox"/> DELETE
12.22 NAME		
12.23 STREET ADDRESS		
12.24 CITY, ST, ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

13.1 OFF		<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.2 NAME		
13.3 STREET ADDRESS		
13.4 CITY, ST, ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.5 OFF		
13.6 NAME		
13.7 STREET ADDRESS		
13.8 CITY, ST, ZIP		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
13.9 OFF		
13.10 NAME		
13.11 STREET ADDRESS		
13.12 CITY, ST, ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.13 OFF		
13.14 NAME		
13.15 STREET ADDRESS		
13.16 CITY, ST, ZIP		

VP  
**THOMAS E. KRANZ**  
**1241 Airport ROAD**  
**Destin, FL 32541**

14. I hereby certify that the information supplied to the filing office is true and correct 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 holder of the power or authority to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in the State of Florida's database of corporations and their officers and directors.

SIGNATURE: *Thomas E. Kranz* VP - CFO 4/30/98 (850) 837-5641

CR2E034 (10/97)