

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 MAY -1 PM 4:43

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 994000045244

1. Corporation Name

MARAVILLA DEVELOPMENT OF DESTIN, INC.

Principal Place of Business

Mailing Address

122 AZALEA DRIVE
DESTIN, FL 32541

P.O. BOX 5404
DESTIN, FL 32540

100001476671
-05/05/95--01006--014
*****200.00 *****200.00

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number

Applied For

59-3247678

Not Applicable

22 Suite, Apt #, etc

27 Suite, Apt #, etc

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

23 City & State

28 City & State

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

24 Zip

25 Country

29 Zip

30 Country

8. This corporation has liability for intangible tax under S 199.032.
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ROB BLUE, JR.
221 MCKENZIE AVE
PANAMA CITY, FL 32402

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 607.1508, 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: Typed or printed name of registered agent and the agent's address

(If 11) Registered Agent signature required after incorporating

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P
NAME JOHN K. RILEE
STREET ADDRESS 3802 INDIGO CIRCLE
CITY ST ZIP DESTIN, FL 32541

11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY ST ZIP

☐ Change ☐ Addition

TITLE D
NAME JOHN R. RUSHING
STREET ADDRESS 1234 AIRPORT ROAD
CITY ST ZIP DESTIN, FL 32541

21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY ST ZIP

☐ Change ☐ Addition

TITLE D
NAME C. WAYNE JONES
STREET ADDRESS ROUTE 1, BOX 76-A
CITY ST ZIP FEEPORT, FL 32439

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY ST ZIP

☐ Change ☐ Addition

TITLE D
NAME F. LLOYD BLUE JR
STREET ADDRESS 1077 INDIAN TRAIL ROAD
CITY ST ZIP DESTIN, FL 32541

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY ST ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY ST ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY ST 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 110.07(3)(a), Florida Statutes. I further certify that the information indicated on this annual report or supplemental 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 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 changed, or on the attachment with an address.

SIGNATURE:

SIGNATURE: TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
JOHN K. RILEE/PRESIDENT

4/28/95
Date

(904) 837-8613