Of multiple     SANTA ROSA BEACH FL 32459     Do NOT WRITE IN THIS SPACE       S     US     3     Destingerouting of guideness     1       S     Control     24. Mailing Address     4. FEI Number     Applied For       CH15     Thomas     24. Mailing Address     4. FEI Number     Applied For       CH15     Thomas     24. Mailing Address     4. FEI Number     Applied For       CH15     Thomas     City & State     5. Control     58.75 Additional       City & State     S. Control     S. Control     7. The control     Address       City & State     S. Control     S. Control     7. The control     Address       City & State     State     S. Control     S. Control     Address       City & State     State     State     State     State       City & State     State     State     State     State       City & State     State     State     State     State       State     State     State     State     State       JONES, J.M.     State     State     State     State       State     State     State     State     State       JONES, J.M.     State     State     State     State       State     State     S	COR ANNU	NOW: FILING FEE A PROFIT RPORATION JAL REPORT 1999		TMENT OF STATE e Harris of State	Apr 30 Secret	FILED , 1999 8:( tary of St 99 90073 005 ***1:	
Marting Address     Mailing Address       VP VS BE     P.O. Dotor 180 SATTA ROSA BEACH FL 3259     Do NOT WRITE IN THIS SPACE       S     US     3. Date Incorporation of Qualitation (Qi 2) 1994       E Principal Place of Business     Z. Mailing Address     4. FEI Number       S     S     S       CH 5     Sufa, Apt. # dic.     S       S dials incorporation of Qualitation     SS 175 Additional Per Required     Applied Per SS 175 Additional Per Required       CH 5     Soute, Apt. # dic.     S. Confidure of Status Desired     SS 175 Additional Per Required       CH 5     Soute, Apt. # dic.     S. Confidure of Status Desired     SS 00 Mey file       CH 5     Soute, Apt. # dic.     S. Confidure of Status Desired     SS 00 Mey file       CH 5     Soute, Apt. # dic.     S. Confidure of Status Desired     SS 00 Mey file       CH 5     Suma and Address of Current Registered Agent     10. Name and Address of New Registered Agent     10. Name and Address of New Registered Agent       JONES, J.M. 802 (HVY 88 E. 107     Specif. Address Status Stat	1. Corporation	n Name	059536				
Obj/12/1994         Applies Fr           2. Principal Place of Damines         2a         Malling Address         4. FEI Number         Applies Fr           SUME, Apr. #. etc.         2a         Sume, Apr. #. etc.         59-3266469         Non Applicable           City & State         2. Certificate of Status Desired         Finance         Finance         State. Apr. #. etc.           City & State         2. Certificate of Status Desired         Finance         State. Apr. #. etc.         State. Apr. #. etc.           20         Country         2a         Country         8. The corporation was the outrer year Intergible Place of Status Desired Agent         International Property Tax.         Viei No           9. Name and Address of Current Registered Agent         10. Name and Address of New State Status Desired Agent         10. Name and Address of Agent         State Status Desired Agent           10. Name and Address of Status Desired Agent         10. Name and Address of Current Registered Agent         State Address (CD. Box Number Isbot Acceptable)           10. The provisions of Sections 607.0502 and 607.1503. Floods Status Desired Of desized Acceptable)         State Address Controls of Sections 607.0502 and 607.1503. Floods Status Desired Of desized Acceptable)           11. Pursuant to the provisions of Sections 607.0502 and 607.1503. Floods Status Desired Address of Operation State Agent Desired Address of Corperation State Acceptable)           12. Mace I and Mad	192 HWY 98 E. 107		P.O. BOX 1610 SANTA ROSA BEACH FL 32	459	DO NOT W	RITE IN THIS SPACE	
Sulta, Appl. #, etc.     Sulta, Appl. #, etc. <td></td> <td>lace of Business</td> <td>2a. Mailing Address</td> <td></td> <td>08/12/1994</td> <td>· · · · ·</td> <td>Applied For</td>		lace of Business	2a. Mailing Address		08/12/1994	· · · · ·	Applied For
2]         27         City & State         6. Election Campaign Financing         Additor Fies           20         County F         28         County F         28         County F         28           20         County F         28         County F         29         County F         20         Cou						<b>\$8.75</b>	Additional
Zip         Country         B         This corporation owes the current year Intangible Personal Property Tax.         Image of the current registered Agent           30         9. Name and Address of Current Registered Agent         10. Name and Address of New Registered Agent         10. Name and Address of New Registered Agent         10. Name and Address of New Registered Agent           30         9. Name and Address of New Registered Agent         10. Name and Address of New Registered Agent         10. Name and Address of New Registered Agent           31         32         33         10. Name and Address of New Registered Agent         10. Name and Address of New Registered Agent           30         32         10. Name and Address of New Registered Agent         10. Name and Address of New Registered Agent           31         107         PC         10. Name and Address of New Registered Agent           31         107         PC         107         PC           107         DESTIN FL 32459         100. Number is New Sections 607 2602 and 607 1508. Florids Statutus, the above named conportion submits inits instement for the propertion of Sections 607 2005. Florids Statutus, the above named conportion submits inits instement for the propertion is sections. Number is New Sectins. Number is New Sectins. Number is New Sectins. Number	<u>, '/)</u>		City & State			9 \$5.0	0 May Be
9. Name and Address of Current Registered Agent       10. Name and Address of New Registered Agent         JONES, J.M. 892 HWY 98 E. 107 DESTIN FL 32459       41         10. 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, <i>B</i> both, in the state of Florida. Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, <i>B</i> both, in the state of Florida. Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, <i>B</i> both, in the state of Florida. Statutes, the above-named corporation statement for the purpose of changing its registered office or registered agent of the florida. Such change was authorized by the corporation's board of directors. In hereby accept the appointment as registered office or registered agent agent and the registered office or registered agent agent agent and the registered office or registered agent agent agent and the registered office or registered agent agent agent agent and the registered office or registered agent agent agent agent agent agent agent agent agent office or registered agent agent office or registered agent agent agent agent agent agent agent agent agent agent office or registered agent agent agent agent agent agent agent agent office or registered agent agent agent agen		Soula Country	Zip		8. This corporation owes the c Personal Property Tax.	urrent year Intangible	
SIGNATURE       J. M. icha 2 if Jours - Jess duard       J. icha	107			83			
12.       OFFICER\$ AND DIRECTORS       13.       ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12         ITTLE       DONES, J M       Intrue       Intr	11. Pursuant office or r	to the provisions of Sections 607.050 egistered agent, o both, in the State	2 and 607.1508, Florida Statutes of Florida. Such change was au	¥	corporation submits this statement for to pration's board of directors. I hereby ac	FL C	ts registered registered
IIILE JONES, J M LIANDE	office or n agent. I a SIGNATURE	registered agent, or both, in the state of im familiar with, and accept the obligat	tions of, Section 607.0505, Flori	s, the above-named thorized by the corp da Statutes. Lichael Ja	ines - Acsident aquired when reinstating)	FL 3 he purpose of changing cept the appointment as <u>4/26/99</u> DATE	
Intry-ST-ZIP       SANTA ROSE BEACH FL 32459       14 CITY-ST-ZIP         ITLE       S       DELETE       21 ITILE         JONES, JUSTIN M       22 MAWE       23 STREET ADDRESS         336 HILLTOP DR       23 STREET ADDRESS       2.4 CITY-ST-ZIP         SANTA ROSA BEACH FL 32459       2.4 CITY-ST-ZIP         ITTLE       33 STREET ADDRESS         STREET ADDRESS       3.3 STREET ADDRESS         STREET ADDRESS       3.3 STREET ADDRESS         ITTLE       DELETE         STREET ADDRESS       3.3 STREET ADDRESS         ITT. ST-ZIP       Change         MARE       DELETE         3.1 TTTLE       Change         ITT. ST-ZIP	office or n agent. I a SIGNATURE 12.	egistered agent, of both, in the state of m familiar with, and accept the obligat Signature, typed of bridee of molecular agen OFFICERS AN	of Florida. Such change was au tions of, Section 607.0505, Flori , , , , t and title if applicable. (NOTE: 1 D DIRECTORS	s, the above-named thorized by the corp da Statutes. <b>LiCHACI JC</b> Registered Agent signature to 13.	ines - Acsident aquired when reinstating)	he purpose of changing cept the appointment as <u>4/26/99</u> officers and Direct	TORS IN 12
WANE     JONES, JUSTIN M     22 MAKE       STREET ADDRESS     336 HILLTOP DR     23 STREET ADDRESS       SANTA ROSA BEACH FL 32459     2.4 CITY-ST-ZIP       ITTLE     DELETE     3.1 TITLE       STREET ADDRESS     3.2 NAME       STREET ADDRESS     3.3 STREET ADDRESS       STREET ADDRESS     3.3 STREET ADDRESS       STREET ADDRESS     3.4 CITY-ST-ZIP       MAME     4.2 NAME       STREET ADDRESS     4.4 CITY-ST-ZIP       MAME     1.3 STREET ADDRESS       STREET ADDRESS     4.4 CITY-ST-ZIP       MAME     1.3 STREET ADDRESS       STREET ADDRESS     4.4 CITY-ST-ZIP       MAME     1.3 STREET ADDRESS       STREET ADDRESS     4.4 CITY-ST-ZIP       MAME     5.2 NAME       STREET ADDRESS     5.3 STREET ADDRESS       STREET ADDRESS     5.4 CITY-ST-ZIP <td>office or n agent. I a SIGNATURE 12. IITLE VAME</td> <td>egistered agent, or both, in the state of im familiar with, and accept the obligat Signature, typed of primed name of ropisterel agen OFFICERS AN PD JONES, J M</td> <td>of Florida. Such change was au tions of, Section 607.0505, Flori , , , , t and title if applicable. (NOTE: 1 D DIRECTORS</td> <td>s, the above-named thorized by the corp da Statutes. Lichael JC Tegistared Agent signature 1 13. 1.1 ITTLE 1.2 NAME</td> <td>ines - Acsident aquired when reinstating)</td> <td>he purpose of changing cept the appointment as <u>4/26/99</u> officers and Direct</td> <td>TORS IN 12</td>	office or n agent. I a SIGNATURE 12. IITLE VAME	egistered agent, or both, in the state of im familiar with, and accept the obligat Signature, typed of primed name of ropisterel agen OFFICERS AN PD JONES, J M	of Florida. Such change was au tions of, Section 607.0505, Flori , , , , t and title if applicable. (NOTE: 1 D DIRECTORS	s, the above-named thorized by the corp da Statutes. Lichael JC Tegistared Agent signature 1 13. 1.1 ITTLE 1.2 NAME	ines - Acsident aquired when reinstating)	he purpose of changing cept the appointment as <u>4/26/99</u> officers and Direct	TORS IN 12
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14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information	office or n agent. I a SIGNATURE 12. ITLE IAME ITREET ADDRESS ITY-ST-ZIP ITLE IAME STREET ADDRESS ITY-ST-ZIP ITLE IAME STREET ADDRESS ITY-ST-ZIP ITLE IAME STREET ADDRESS ITY-ST-ZIP ITLE IAME STREET ADDRESS	egistered agent, or both, in the state of im familiar with, and accept the obligat Signature, typed in prived indue of rydistered agen OFFICERS AN PD JONES, J M 201 HIGHLAND AVENUE SANTA ROSE BEACH FL 32455 S JONES, JUSTIN M 336 HILLTOP DR	9 9 9 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	s, the above-named thorized by the corp da Statutes. <b>LiChael Ja</b> Registered Agent signsture f <b>13.</b> 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS	equired when reinstating) ADDITIONS/CHANGES TO (	<b>⊢</b>	TORS IN 12 e Addition e Addition e Addition