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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

1996

DIVISION OF CORPORATIONS DOCUMENT #
1. Corporation Name P94000063050 (6)

ADVANTAGE GROUP OF NORTHWEST FLORIDA, INC.					
Principal Place of Business Mailing Address  908 HIGHWAY 98 EAST 908 HIGHWAY 98 EAS DESTIN FL 32541 DESTIN FL 32541		Mailing Address			//
		AST			
				<ol> <li>Date Incorporated or Qualified 08/22/1994</li> </ol>	3s. Date of Last Report 08/17/1995
2. Principal Pla	ace of Business	2a. Mailing Address		4. FEI Number	Applied For
Suite Act #	Hay 1.98 Sale	Suite, Apt. #, etc.	115 2046 906	59-3296932	Not Applicable
12 Dect	n 418	27 .		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		Oity & State	418	Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be
Zip	Country	ZiO	Country	This corporation has liability for	Added to hees
4	9. Name and Address of Curr	29 32541	30 USA		s [] No
	<ol><li>Name and Address of Cur</li></ol>	ent Registered Agent		10. Name and Address of New I	
	i, greg Hway 98 East Fl 32541		82 Street Addr 89 C S 83	ess (P.O. Box Number is Not Acceptate Hours 12. 98	1110 008
11. Pursuant to	the provisions of Sections 607.05	02 and 607.1508, Florida Statu	100 to the shape of		FL 85 Zip Code コンジリ/ irpose of changing its registered office
or registere familiar with	ed agent, or both, in the State of Fla n, and accept the obligations of, Se	orida. Such change was author ection 607.0505, Florida Statute	ized by the corporation's boar as.	ation submits this statement for the pu d of directors. I hereby accept the app	pose of changing its registered office pointment as registered agent. I am
SIGNATURE ::	flynatiste, typerflör printed name of negestered ag	-sit and this darphophe in	NOTE Registered Agent signature required	Lubra revetatora	DATE
12.	OFFICERS A	ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFF	
TITLE NAME STREET ADORESS	D Peaden, Greg 908 Highway 98 East	DELETE	1.1 TITLE D 1.2 NAME  1.3 STREET ADDRESS & 9	ed fendin	St Ohanna (T) 4 4 4 7 7
COTY+ST ZIP	DESTIN FL 32541			cim, 110 32041	
DH.F		☐ DELETE	2 1 TITLE	्राम, याट उद्यान	Change Addition
AME.			22 NAME		
JREET ADDRESS			2 3 STREET ADDRESS		
HY ST-ZIP			2 4 CITY-ST-ZIP		
THE .		DELETE	3 1 TIFLE	-	Change Addition
IAM(			3 2 NAME		
PEFF ADORESS			3.3 STREET ADDRESS		
DITY-ST-7FF		F Dr. Fr	3 4 CITY - ST - ZIP		
		☐ DEFELF	4 1 TITLE		Change Addition
JAME JBEFT ADDRESS			4.2 NAME		
			4.3 STREET ADDRESS		
ITY - ST - ZIR ITUE		M origin	4.4 CITY - ST - ZIP		
ĺ		☐ DELETE	\$ 1 TITLE		Change Addition
AMI Inchi andonese			5.2 NAME		
DIFFEL ASURESS			5 3 STREET ADDRESS		
ITY-SE-ZIP ITLE		- Distre	5.4 CITY-ST - 7IP		
		☐ DELETE	6 1 THLE		☐ Change ☐ Addition
CM:			6.2 NAME		
IRELLADDRESS			6.3 STREET ADDRESS		
IIIY SI-ZIF	cortify that the information of	L. She about Pro-	6.4 CITY - ST - ZIP		
oath; that I a		poration or the receiver or truste	ee empowered to execute this	r the exemption stated in Section 119.6 e and that my signature shall have the report as required by Chapter 607, Fic	

SIGNATURE:

BIGNATURE AND TYPED ON PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

904 857 3350