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

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1998

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9400071303 (9)

CORDOVA LAND INVESTMENTS, INC.

FILED Mar 27 1998 8:00am Secretary of State



4400 BAYOU BLYD SUITE 8B PENSACOLA FL 32503			4400 BAYOU BLVD SUITE 6B PENSACOLA FL 32503						DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 09/28/1994		
2. Principal Place of Business 21			2a. 26	2a. Mailing Address 26					4. FEI Number Applied For 59-3271281 Applied For Not Applicable		
Suite, Apt. #, etc.			27	Suite, Apt. #, etc.					Certificate of Status Desired Section		
City & State			28	City & State					6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees		
Zip Country 24 25			29				,		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No		
9, Name and Address of Current Registered Agent 10, Name and Address of New Registered Agent FI FMIMO FINARD P 81 Name											
FLEMING, EDWARD P						ן ים [N	ame	3		
4300 BAYOU BLVD SUITE 12 & 13						82 83	St	reet A	1 Address (P.O. Box Number is Not Acceptable)		
PENSACOLA FL 32503-1009											
						84			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 p	ornled name of registered agent				d Age	ent sig	nature	re required when reinstating) DATE		
12.	PSDT	OFFICERS AND	DIREC	DELETE	13.	AT1 F			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition		
TITLE	TIPPENS, C	SARV		- ottere	1.1 To			l	C strange C worthood		
NAME .		OU BLVD. STE. 6B			1.2 N						
DENGACOLA EL 22E02				1.3 STREET AD							
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NAME					6.2 N	AME					
STREET ADDRESS					6.3 S	TREET	ADOI	RESS			
CITY-ST-ZIP					6.4 C	ITY-S	T- ZIP	. [
	pertify that the in	formation supplied with	this fi	ing does not qualify f					ted in Section 119.07(3)(i). Florida Statutes, I further certify that the information		

L 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 indicated on this annual report or 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 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 an attachment with an address.

(850)484-290