

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

FILED

Apr 14 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P95000005383 (1)

1. Corporation Name  
OMD PENSACOLA, INC.

Principal Place of Business 236 W GARDEN ST STE 4 PENSACOLA FL 32501 US	Mailing Address 236 W GARDEN ST STE 4 PENSACOLA FL 32501 US
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DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 01/19/1995	4. FEI Number 59-3146074	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		

2. Principal Place of Business 21 4184 MADURA RD Suite, Apt. #, etc.	2a. Mailing Address 26 P.O. BOX 1992 Suite, Apt. #, etc.
22 City & State 23 GULF BREEZE, FL. Zip 24 32561	27 City & State 28 PENSACOLA, FL Zip 29 32584-1992
25 SANTA ROSA	30 ESCAMBIA

9. Name and Address of Current Registered Agent DARDEN, OLIVER M 236 W GARDEN ST STE 4 PENSACOLA FL 32501	10. Name and Address of New Registered Agent 81 Name DARDEN, OLIVER M 82 Street Address (P.O. Box Number is Not Acceptable) 4184 MADURA RD 83 84 City GULF BREEZE FL 85 Zip Code 32561
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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: *Oliver M. Darden* OLIVER M. DARDEN DATE: Jan 2, 1998

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PS DARDEN, OLIVER 41884 MADURA RD GULF BREEZE FL 32561	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	PRESIDENT OLIVER M. DARDEN 4184 MADURA RD GULF BREEZE, FL. 32561
TITLE NAME STREET ADDRESS CITY-ST-ZIP		2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	

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 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.

SIGNATURE: *Oliver M. Darden* OLIVER M. DARDEN 850-934-3955 JAN 2, 1998

CR2E034 (10/97)