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

**PROFIT CORPORATION** ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000009298 (7)

SOUTHERN COMFORT DEVELOPMENT COMPANY, INC.

**FILED** Mar 24 1998 8:00am Secretary of State



### Address  ### Applied For										
PALMETTO FL 34294    PALMETTO FL 34294   DO NOT WRITE IN THIS SPACE								19119 9119 11918 181	181 1911 1981	
2. Principal Place of Business 2. Adulting Address 2. Principal Place of Business 2. Authority	1 27 22 27			ST						
2. Principal Place of Business   2a Mailing Address   4. FET Number   Applied For   25   26   27   27   28. Certificate of Status Desired   \$8.75 Additional Pen Regular   26   27   27   28. Certificate of Status Desired   \$8.75 Additional Pen Regular   27   29   29   29   29   29   30   29   30   29   30   30   30   30   30   30   30   3	PALMETTO F	L 34224	PALMETTO PL 34224	PALMETTO FL 34224			DO NOT WRITE IN THIS SPACE			
2. Mainly Address   2. Mainly Address   3. Mainly Address   4. FEI Number   Applied For   Applied For   Not Applied For							3. Date Incorporated or Qualified		]	
Surie, Apr. 4, etc.    20										
Suite, Apt #, enc.  2 Suite, Apt #, enc.  3 Suite, Apt #, enc.  4 Suite, Apt #, enc.  2 Suite, Apt #, enc.  3 Suite, Apt #, enc.  4 Suite, Apt #, enc.  4 Suite, Apt #, enc.  5		lace of Business	2a. Mailing Address	<del> </del>			4. FEI Number	Ar	pplied For	
City & State  Ci	21			<del></del>			65-0555061			
28) 29) 20) 20) 20) 20) 20) 20) 20) 20) 20) 20	22		27	27			5. Certificate of Status Desired	1 1 1 1		
Zip   Country   Zip   Country   Set   This corporation owes or has paid the current year inlang bio   Set   No.   Set   No.   Name and Address of Current Registered Agent   Set   No.   Name and Address of Current Registered Agent   Set   No.   Name and Address of New Registered Agent   Set   No.   Name and Address of New Registered Agent   Set   No.   Name and Address of New Registered Agent   Set   No.   Name and Address of New Registered Agent   Set   No.   Name and Address of New Registered Agent   Set   No.   Name and Address of New Registered Agent   Set   No.   Name and Address of New Registered Agent   Set   No.   Name and Address of New Registered Agent   Set   No.   Name and Address of New Registered Agent   Set   No.   Name and Address of New Registered Agent   Set   No.   Name and Address of New Registered Agent   Set   No.   Name and Address of New Registered Agent   Set   No.   Name and Address of New Registered Agent   Name and Name   Name and Na		е	├── <b>¬</b> `	h						
25   28   30   Personal Property Tax due June 30.   Yes   No   No   No   No   No   No   No   N		Country								
B. Name and Address of Current Registered Agent MAPES, REED W. 43S 10TH AVENUE WEST SUITE 2100 PALMETTO FL 34221  84 City FL 85 Zip Code  85 City FL 85 Zip Code  11. Pursuant to the provisions of Socions 697 0502 and 697 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and advang the distingtions of Socions 697 0502 and 697 1508, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and advang the distingtions of Socions 697 0502, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and advang the distingtions of Socions 697 0505, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent agents in familiar with, and advang the appointment as registered agent agents required when ministering.  SIGNATURE  Dispatch hydro or principles joint advise a agentate  Dispatch hydrogen agent agents required when ministering.  DELETE  11 Title  DELETE  11 Title  DELETE  11 Title  DELETE  21 Title  DELETE  21 Title  DELETE  21 Title  DELETE  31 Title  DELET	_ `			$\vdash$	ittry					
MAPES, REED W. 435 10TH AVENUE WEST SUTTE 2100 PALMETTO FL 34221  82 Street Address (P.O. Box Number is Not Acceptable)  83 Street Address (P.O. Box Number is Not Acceptable)  84 City FL 85 Zip Code  11. Pursuant to the provisions of Socions 607,0502 and 607 1508. Florida Statutes, the even 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, and accept the obligations of, Section 607,0505, Florida Statutes, the even requision submits this statement for the provisions of Socions 607,0505, Florida Statutes, the even provided by the corporation's board of directors, I hereby accept the appointment as registered agent agent and in a provided with a statement of requision and the provision agent. I am familiar with, and accept the bodingations of, Section 607,0505, Florida Statutes, and the provisions of the provisions o	24									
## 435 10TH AVENUE WEST SUITE 2100 PALMETTO FL 34221  ## 52	MA				<b>B1</b>	Name	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
SUITE 2100 PALMETTO FL 34221  11. Pursuant to the provisions of Socions 507 0502 and 607 1508. Florida Statutas, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the oblighten of 57 0505 florida Statutas.  SIGNATURE  SIGNATURE  SIGNATURE  OFFICERS AND DIRECTORS  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  17. NAME  MAPES, REED W  435-IDIT AVE. WEST  13. REET ADDRESS  CITY-S1-2P  17. LE  DELETE  21. TITLE  DELETE  31. TITLE						0:	(5.0. p. ) .			
PALMETTO FL 34221  11. Pursuant to the provisions of Socions 607 0502 and 607 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agont, 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 agont, are familiar with, and accept the obligations of. Section 607 0505, Florida Statutes.  SIGNATURE  SIGNATURE  SIGNATURE  Signature, typed to privide name of repowers agont and their appointment.  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  11/1 ITIE  MAPES, REED W  12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  11/1 ITIE  MAPES, REED W  13. SIRRET ADDRESS  CITY-ST-ZPP  PALMETTO FL 34221  DELETE  21 TITLE  21 TITLE  22 TIME  23 TIRET ADDRESS  CITY-ST-ZPP  14 CITY-ST-ZPP  Change  Addition  Addition  MAPES, REED W  13. SIRRET ADDRESS  24 CITY-ST-ZPP  Change  Addition  Addition  Addition  MARE  31 STRET ADDRESS  CITY-ST-ZPP  TITLE  DELETE  41 TITLE  41 TITLE  42 TIME  44 TITLE  44 TITLE  44 TITLE  45 TITLE  44 CITY-ST-ZPP  Change  Addition  Addition  Addition  MARE  53 STRET ADDRESS  CITY-ST-ZPP  TITLE  57 TITLE  57 TITLE  57 TITLE  58 TITLE  58 TITLE  59 TITLE  51 TITLE					B2	Street Addr	.ddress (P.O. Box Number is Not Acceptable)			
11. Pursuant to the provisions of Socions 607 0502 and 607 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agont, 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 agont, 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 agont and size it appointment as registered size.  SIGNATURE  SIGNATURE  12.					63			· · ·		
11. Pursuant to the provisions of Socions 607 (5002 and 607 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 607 (5005, Florida Statutes, SIGNATURE)    Signature	Transition of the Original Property of the Control				84 City 85 Zip Co			Code		
ortice or registered agent, or both, in this State of Horiza. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent and manual minimal with obligations of, Section 607 9505, Florida Statutes.    Signature byted or printed name of registered agent and title if applicable   (NOTE Registered Agent signature required when reinstating)   DATE	447 5		F00 - 4 007 4500 Fb (4, 0)	4 - 11 - 11						
Signature, typed or printed name of registered in list of apprications (NOTE Registered Agent signature required when reinstating)	office or registered agont, 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.									
TILL OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE MAPES, REED W  STREET ADDRESS CITY-S1-2P TITLE NAME STREET ADDRESS CITY-S1-2P TOTAL STREET ADDRESS CITY-S1-2P STREET ADDRESS STREET ADDRESS CITY-S1-2P STREET ADDRESS CITY-S										
NAME   STREET ADDRESS   435-10TH AVE. WEST   FALMETTO FL 34221   1.4 CITY-ST-2P   1.4 CIT	12.					nt agnatoro rodgini			RS IN 12	
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TITLE	STREET ADDRESS			1.3 STREET ADDRE		ADDRESS				
NAME	CITY-ST-ZIP	PALMETTO FL 34221		1.4 C()	TY- S1	r-zip				
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CiTY-ST-ZIP 6.4 CiTY-ST-ZIP	-									
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		certify that the information synaling	with this filing does not qualify				Section 119 07/3Vi) Florida Statutos Lifethan	contifu that the	Information	

indicated on this annulal 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: