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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATI

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000011375 (9)

1. Corporation	W CORPORATION, INC.	(0)					
Principal Place	e of Business	Mailing Address			T I TERLINAGE ING VENDE BININ ROKIN ROKIN BORIN DENIN D	(1)	TO F THE TO STATE OF THE TOTAL PROPERTY OF THE TOTAL PROPERTY OF THE TOTAL PROPERTY OF THE TOTAL PROPERTY OF T
156 ROLLING DUNES DR. SANTA ROSA BEACH FL 32540		156 ROLLING DUNES DR. SANTA ROSA BEACH FL 32549		DO NOT WRITE IN	THIS SPACE		
					3. Date Incorporated or Qualified 02/08/1995	THO STAGE	
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number	A	pplied For
21		26		59-3295647		ot Applicable	
Suite, Apt. #. etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired		Additional lequired	
City & State		City & State		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
Zip 24	Country 25	Z(p) 30	Count	ry	This corporation owes or has paid to Personal Property Tax due June 30		tangible No
	9, Name and Address of Current	Registered Agent			10. Name and Address of New Regis	tered Agent	
	rks, Jacqueline M		8	1 Name			
308 RUSKIN PLACE SEASIDE FL 32549			8:	2 Street Add	ress (P.O. Box Number is Not Acceptable)	<u>.</u>	
•	TOIDE I C DESTE		8	3			
			84	4 City		FL 85 Zip	Code
SIGNATURE	Morale	2			poration submits this statement for the purp tion's board of directors. I hereby accept the	L_/997	its registered s registered
12,	Signature, typed or printed name of regions and agent DEFICERS AND		legislered A	gent signature requi	red when reinstating) ADDITIONS/CHANGES TO OFFICER	DATE DIRECTO	BS IN 12
TITLE	P	DELETE	1.1 TITLE		ADDITIONS/CHANGES TO CITICE	☐ Change	Addition
NAME	BAKEWELL, ANTHONY	_	1.2 NAME	Ι.			
STREET ADDRESS	156 ROLLING DUNES DR.		1.3 STREI	ET ADDRESS			
CITY-ST-ZIP			1.4 CITY-ST-ZIP				
TITLE	V	DELETE	2.1 TELE			☐ Change	☐ Addition
NAME	PARKS, JAQUELINE M		2.2 NAME				1
STREET ADDRESS	156 ROLLING DUNES DR.	_	2.3 STREE	ET ADDRESS			
CITY-ST-ZIP	SANTA ROSA BEACH FL 3245	DELETE	2. 4 CITY			Change	Addition
TITLE		C DELETE	3.1 TITLE	i		□ Change	Addition
NAME			3.2 NAME				ŀ
STREET ADDRESS				T ADDRESS			
CITY-ST-ZIP TITLE			3.4. CFTY 4.1 TITLE	-51-282		Change	Addition
NAME			4. 2 NAM			sand orange	
STREET ADDRESS				T ADDRESS			ļ
CITY-ST-ZIP			44 CITY-				ļ
TITLE		DELETE	51 TITLE		· · · · · · · · · · · · · · · · · · ·	Change	☐ Addition
NAME			5.2 NAME	:			
CIRCULATIONS CC			an CTOS	T ADDOSCO			

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 13 if chapter 607 in attachment with an address.

6.1 TITLE

6.2 NAME

63 STREET ADDRESS

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

TITLE

NAME

JACQUEUNE H. PAR

DELETE

20 Repril 1998

850-267-34N

Addition

FILED

Apr 28 1998 8:00am

Secretary of State