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CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000015338 (3)

COYOTE LAND CO., INC.

Principal Place of Business 2377 HWY. 20 WEST FREEPORT FL 32439

Mailing Address

P.O DRAWER 12684 PENSACOLA FL 32574-2684

FILED Jan 30 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 02/23/1995

Suite, Apt. #, etc. Suite, Apt. #, etc. 27 Suite, Apt. #, etc. 28 Suite, Apt. #, etc. 29
City & State City
City & State
Zip
Zip
29 29 30 Personal Property Tax due June 30 Yes No
9. Name and Address of Current Registered Agent HALFORD, DOUGLAS C 600 S BARRACKS ST SUITE 210 PENSACOLA FL 32501 83 Street Address (P.O. Box Number is Not Acceptable) 84 City FL 85 Zip Code 85 Zip Code 86 City FL 85 Zip Code 87 Signature, typad or printed name of 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, in an immirrant with, and accept the obligations of, Section 607.0505, Floridad Statutes. 88 Signature Signature FL 85 Zip Code 89 Signature virtual to the provisions of Sections 607.0505, Floridad Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am immirrant with, and accept the obligations of, Section 607.0505, Floridad Statutes. 88 Signature FL 85 City Signature, typad or printed value or registered agent and title it applicable. 88 Signature, typad or printed value or registered agent and title it applicable. 89 Signature, typad or printed value or registered agent and title it applicable. 90 Signature, typad or printed value or registered agent and title it applicable. 90 Signature, typad or printed value or registered agent and title it applicable. 90 Signature, typad or printed value or registered agent and title it applicable. 90 Signature, typad or printed value or registered agent and title it applicable. 90 Signature, typad or printed value or registered agent and title it applicable. 90 Signature, typad or printed value or registered agent and title it applicable. 90 Signature, typad or printed value or registered agent and title it applicable. 90 Signature, typad or printed value or registered agent and title it applicable. 90 Signature, typad or printed value or registered agent and title it applicable. 90 Signature, typad or printed value or registered agent and title it applicable. 90 Signature, typad or printed value or registered agent and title it applicable. 90 Signature, typa
HALFORD, DOUGLAS C 600 S BARRACKS ST SUITE 210 PENSACOLA FL 32501 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 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 607.0502, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent and familiar with, and accept the obligations of Section 607.0502, Florida Statutes. 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 14. IN TILE PHALFORD, DOUGLAS C 600 S BARRACKS ST., SUITE 210 PENSACOLA FL 15. INTE 10. SECTIONS STREET ADDRESS CITY-ST-2P 10. DELETE 15. TITLE 10. DELETE 21. TITLE 22. NAME 33. STREET ADDRESS CITY-ST-2P 10. Change Addition ACTY-ST-2P 10. Change
SIGNATURE PRIVATE 10 PENSACOLA FL 32501 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 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 approximent as registered agent, and cacept the obligations of, Section 607.0505, Florida Statutes. The submit of 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 approximent as registered agent, and the submit of the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. TITLE PALIFORD, DOUGLAS C 600 S BARRACKS ST., SUITE 210 PENSACOLA FL 12. AUMME 12. AUMME 14. City-ST-2IP 17. ST-2IP 1
SUITE 210 PENSACOLA FL 32501 83 84 City FL 85 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as 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, arm familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, hypat or printed name of registered agent and site it applicable. PORTICERS 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. NAME HALFORD, DOUGLAS C 600 S BARRACKS ST., SUITE 210 PENSACOLA FL 13. SIRRET ADDRESS 600 S BARRACKS ST., SUITE 210 13. SIRRET ADDRESS 600 S BARRACKS ST., SUITE 210 22. NAME JOHNSON, BOLLEY L 600 S BARRACKS ST., SUITE 210 PENSACOLA FL 22. NAME SIRRET ADDRESS 600 S BARRACKS ST., SUITE 210 PENSACOLA FL 10. DELETE 32. NAME SCHWEIZER, TODD 600 S BARRACKS ST., SUITE 210 PENSACOLA FL 10. Change Addition 10. Change Addition 10. Addition 10. Addition 10. ACCITY-ST-ZIP 11. TILE 10. Change Addition 10. ACCITY-ST-ZIP 11. ACCITY-ST-ZIP 1
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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 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, a minimizer with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed insme of registered agent and talls if applicable. (NOTE Registered Agent algnature required when reinstating). DATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE PHALFORD, DOUGLAS C 600 S BARRACKS ST., SUITE 210 13 SIREET ADDRESS CITY-ST-ZIP DELETE 1 SITTLE STREET ADDRESS 12 STREET ADDRESS 13 STREET ADDRESS 14 STREET ADDRESS 15 STREET ADDRE
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statuties, 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, and take the purpose of changing its registered agent, and take appointment as registered agent, and take appointment as registered agent and take appointment as registered agent and take appointment as registered agent agent, and agent a
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 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, in a familiar with, and accept the obligations of, Section 607.0508, Florida Statutes. SIGNATURE SIGNATURE
SIGNATURE Signature, typed or printed name of registered agent and tile if applicable. (NOTE Registered Agent signature required when reinstalling) DATE
SIGNATURE Signature, typed or printed name of registered agent and tile if applicable. (NOTE Registered Agent signature required when reinstalling) DATE
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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 suppliemental 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 conporation 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.

GNATURE

850-433-057