FILI	E NOW: FILING FEE	AFTER MAY 1 I	S \$225 00		
PROFIT CORPORATION ANNUAL REPORT 1996		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS			
DOCUI	MENT # P9500	00033052 (8	3)		
Corporation DEVEL	LOPMENT & FINANCIAL R	•	,	1 120 (100 100 1000 000)	Bana benab nabe nake ana bana bana ana kan
Principal Place of Business 398 LINKSIDE DRIVE DESTIN FL 32541		Mailing Address 398 LINKSIDE DRIVE DESTIN FL 32541		T HOURING IN COURT DAIR GOOD ONLY	
2 Principal Pla	ace of Business	2a. Mailing Address		3. Date Incorporated or Qualified 04/24/1995	3a. Date of Last Report
21 Suite, Apt. #		26 Suite, Ant. #, etc.		4. FEI Number 59 - 3335380	Applied For Not Applicable
22 City & State		27 City & State		Certificate of Status Desired G. Election Campaign Financing	\$8.75 Additional Fee Required \$5.00 May Be
23 Zip	Country	28 Zip	Country	Trust Fund Contribution 8. This corporation has liability for in	Added to Fees
24	9. Name and Address of Curre	29 nt Registered Agent	30 WA/1•A	Florida Statutes Yes 10, Name and Address of New Re	
11. Pursuant to	KSIDE DRIVE FL 32541 of the provisions of Sections 607,0500		83 84 City	oress (P.O. Box Number is Not Acceptable pration submits this statement for the purpard of directors. I hereby accept the appoint	FL 85 Zip Code
	Signature, typed by vinted name of registy ad agon		t. Registered Agent signar ire requir	od wt en reinst and	Ffort
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D EARLES, CHARLES E 3218 BAY ESTATES DESTIN FL 32541	D DIFFECTORS DELETE	13. 1. 1 TILLE 1.2 NAME 1.3 STACET ADDRESS	ADDITIONS/CHANGES TO OFFIC	CERS AND DIRECTORS IN 12 Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HEFNER, DONALD B 974 EMERALD BAY DRIVE DESTIN FL 32541	DELETE	1.4 CHY-SE-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CHY-SE-ZIP		Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Gray, Billy 398 Linkside Drive Destin Fl 32541	□ DELETE	3 1 TITLE 3 2 NAME 3 3 STREET ADDRESS 3 4 CITY-ST-7IP		☐ Change ☐ Addition
NAME STREET ADDRESS CITY-SE-ZIP		□ DELETÉ	4.1 TITLE 4.2 NAME 4.3 STHEET ADDRESS 4.4 CITY-ST-ZIP	\$10.010.01 775. -63/27/96 - 610 ***206.00	Change Addition
TITLE NAME STREET ADDRESS CITY-S1-ZIP		☐ DELETE	5 1 TITLE 52 NAME 53 STREET ADDRESS 54 CITY - ST-2IP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS		☐ DELETE	6 1 TITLE 6.2 NAME 6.3 STREET ADDRESS		Change Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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:

SIGNATURE

SIGNATURE AND TYPES OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6.4 CITY - ST - ZIP

CITY-ST-ZIP