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

Mailing Address

PROFIT CORPORATION ANNUAL REPORT.

1999

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

34880 EMERALN LARCH PARKWAY

DOCUMENT # 1. Corporation Name Henry Maclin Properties Inc. May 21, 1999 8:00 am Secretary of State

05-21-1999 90005 019 ***150.00

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34880 Emerald Coast Park	way 34880 EMORA	ld loasi	+ Parkua	ıy				
Destin FL 32541	Destin, FG 32541			DO NOT WRITE IN THIS SPACE				
JOHN FL 32591		,,,		3. Date Incorpora	3. Date Incorporated or Qualifed			
				05/	10/95			
2. Principal Place of Business	2a. Mailing Address			4. FEI Number		Α	pplied For	
3 5008 ENGLAID COAST PATKWA	W 26 35008 EMERALD (oast 19	AKWAL	1 59-33	316942		lot Applicable	
Suite, Apt. #, etc.	Suite, Apt. #, etc.					\$8.75	Additional	
,, 400	400 27 400				Certificate of Status Desired Fee Required			
City & State City & State				6. Election Camp	6. Election Campaign Financing S5.00 May Be			
DESTIN, FL	28 DESTIN,	FL		Trust Fund Cor	ntribution	Added	to Fees	
Zip Country 23 32541 25 V5	Zip 29 32541	Coun:	/ 5	8. This corporation Personal Prope	n owes the current yea erty Tax.	r Intangible ☐ Yeş	X No	
9. Name and Address of Current Registered Agent				10. Name and Ad	10. Name and Address of New Registered Agent			
01. 5 11 111		8	1 Name	5 0 0	*			
Robert E. McGill III			2 Strant	SAME_ Address (P.O. Box Numbe	s is Not Assentable)			
743 HWY 98, EAS	st Suite 5	'	Julean /	36008 EMER	AID COAST P	RKWAY	Ste 301	
743 Hwy 98, EAS Desta FL 32541		Ī	13		····		<u>-</u>	
· Destin FL 32541		<u> </u>						
			14 City 7) Estin	ı	85 Zip	Code 5 4 1	
 Pursuant to the provisions of Sections 607.050 office or registered agent, or both, in the State agent. I am familiar with, and accept the obliga 	of Florida. Such change was au	thorized b	ly the corpo	corporation submits this st pration's board of directors	atement for the purposi . I hereby accept the ap	e of changing it oppointment as ri	s registered egistered	
SIGNATURE Signature, typed or printed name of registered ager	nt and blie if applicable (NOTE:	Registered Ar	ent signature re	equired when reinstating)	DATE			
	OFFICERS AND DIRECTORS			·	NS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
THE ROSE PSC				5Ame	· · · · · · · · · · · · · · · · · · ·	Change	Addition	
NAME HEALDY W MACH	N III	1.2 NAM	.	same	_	• •		
NAME HENRY W. MACKE STREET ADDRESS 34880 EMERALD CO	AST Parkway	1.3 STRE	ET ADDRESS	35008 EME	RNLD COAST P.	Arkway.	Suite 40	
CITY-ST-ZIP Destar FL 325	•	1.4 CITY	ST-7IP	DESTIN, FL				
TITLE DESTRUCTION	☐ DELETE	2 ; TITLE			<u> </u>	Change	Addition	
NAME		2,2 NAM	-					
STREET ADDRESS		1	ET ADDRESS					
<u> </u>		2.4 CITY						
CITY-ST-ZIP TITLE	☐ DELETE	3 1 TITLE				Change	Addition	
		3.2 NAME					~ -	
NAME CYRICET ADDRESS								
STREET ADDRESS		B	ET ADDRESS					
CITY-ST-ZIP		34 CITY	-51-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 of 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 cerporation 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 changes, or on an attachment with an exercise with all other like empowered.

4.1 TITLE

4. 2 NAME

5.1 TITLE

52 NAME

61 TITLE

62 NAME

4.3 STREET ADDRESS 4.4 CITY-ST-ZIP

5.3 STREET ADDRESS

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6.4 CITY-ST-ZIP

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TITLE

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W. MACLIN

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