## 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 # P95000039785 (7)

ELD, INC.

## **FILED** Apr 03 1998 8:00am Secretary of State



Principal Plac	e of Business	Mailing Address			1 10011201 110 1010) 01111 00111 00111 00111 00111 01111	, p. p. q. 1. (94.	
39987 EMERALD COAST PKWY P.O. BOX 5220							
DESTIN FL 32541 NICEVILLE FL 325							
					DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualified		
					05/16/1995		
2. Principal Place of Business 2e. Mailing Address						Applied For	
21 26					59-3322268	Not Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc.					\$8.75	Additional	
22		27			L. b. Certificate of Status Desired L. L	Required	
City & Stat	6	City & State	City & State		6. Election Campaign Financing \$5.0	<b>0</b> May Be	
23		28				d to Fees	
Zip	Country Zip		Countr	v	8. This corporation owes or has paid the current year Intangible		
24	25	29 30		•	Personal Property Tax due June 30. Yes No		
Name and Address of Current Registered Agent     10. Name and Address of New Registered Agent							
SHARPE, JAMES 81 Name C Lavy 1/0/1							
				Steve Hall			
39987 EMERALD COAST PKWY			82	310408 Emercia Coast Parkuray			
DESTIN FL 32541							
			83	$\mathbf{R}_{i}$	Idina II. Shite 2201 /OU).	South Ce	
			84	La City	85 Z	D Code	
" Took;					elin. FL  °°  a	asili l	
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'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							
1 V 77							
SIGNATURE Superior synted name of reg ground agent and little II applicable. (NOTE Registered Agent signature required when reinstating)  DATE							
12.		AND DIRECTORS	13	Total Organization	ADDITIONS/CHANGES TO OFFICERS AND DIRECTO	ORS IN 12	
TITLE	P	DELETE	1.V ITLE	·····	P-Directors Change		
NAME	SHARPE, JAMES A				and of Tames	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	39987 EMERALD COAST F	NAMA.	1.2 NAME	i	SHARPE, TAMES A. 39987 Rememble Coast Prior		
STREET ADDRESS	DESTIN FL 32541	17411		T ADDRESS	3998 Le Marala Coust 1	ļ	
CITY-ST-ZIP	l	The last		ST-ZIP	Destin, FL 32541		
TITLE	VP	DELETE	2.1 ITLE		VP-Directors X Change	e [_] Addition	
NAME	ANGNER, JOSEPH J.	_	2. HAME		ANGNER, SOSEPH 3: A DE		
STREET ADDRESS				T ADDRESS			
CITY-ST-ZIP	GERMANTOWN TN 📑	38/39	2. CITY	ST - ZiP	Germantown, TN 38139		
TITLE	(7)	DELETE	3. ITLE		VP_ Nimbors Y Change	Addition	
NAME	CHRISTIE, GERALD J		3 HAME	Ī	CHRISTIE, GERALD J.	_	
STREET ADDRESS	1348 EMERALD BAY DR			T ADDRESS	CHUSTICI GERMANIE		
	DESTIN FL				1348 Emerala Day 101		
CITY-ST-ZIP	8	OF LETT		ST-ZIP	0624111 15 09041	107	
TITLE	-	DELETÊ	4. TITLE		Directors Change	Addition	
NAME	HARRIS, HELENE R	-	4. NAME		LARRY MCBILL		
STREET ADDRESS	4540 HWY 20 EAST		4.3 STREE	t address	9383 W. Main-Suite 217		
CITY - ST - ZIP	NICEVILLE FL 32578		4.4 C/TY -	ST-ZIP	Dothan, FL 36302		
TITLE	5	☐ DELETE	5.1 <sup>1</sup> 11TLE		Change	Addition	
NAME	CARR, SHANNON S		5.2 NAME				
STREET ADDRESS	736 ST THOMAS COVE			T ADDRESS			
]	NICEVILLE FL						
CITY-ST-ZIP	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	DELETE	54 CITY -	51 - ZIP	DIRECTO'S Change	X Addition	
TITLE		☐ OELETE	6.1 TITLE		DIRECTORS LI Change	M ADDRIGGE	
NAME			6.2 NAME		Dr. Andrew E. Giesen 588 Mooney Road	'	
STREET ADDRESS			63STREE	T ADDRESS	588 Mooney Koad		
CITY-ST-ZIP	[		64 CITY -		FE. Walton Beach, FL 3254	17	
14. I hereby o	certify that the information supplied	d with this filing does not qualify t	or the exemp	otion state	ed in Section 119.07(3)(i), Florida Statutes. I further certify that the	ne 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 eath; 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 chargett, or on an attachment with an adoless.							