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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

**FILED** May 06 1998 8:00am Secretary of State

Principal Place of Business  159 BOCA LAGOON DRIVE PANAMA CITY BEACH FL 32408  POSSIBLE PANAMA CITY BEACH FL 32408  POSSIBLE PANAMA CITY BEACH FL 32408				DO NOT WRITE IN THIS SPACE  3. Date incorporated or Qualified	
9 Principal P	Mace of Business	28. Mailing Address		07/05/1995 4. FEI Number	Applied For
21 26		<b>⊢</b> ¬ *		59-3326419	Not Applicable
		Suito, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 24	Country 25 9. Name and Address of Curre	Ζιρ 29	Country 30	This corporation owes or has paid the c Personal Property Tax due June 30.     Name and Address of New Registere	current year Intangible
	ESS, BRIAN D	ur vediarered waeur	81 Name	10. Name and Address of New Registers	a Agent
	108 FRONT BEACH ROAD			(D.O. Day Number is Not Assertable)	
PANAMA CITY BEACH FL 32408			Street Add	ress (P.O. Box Number is Not Acceptable)	
			83		
			84 City	F	85 Zip Code
11. Pursuant office or r agent. I a	to the provisions of Soctions 607.050 registered agent, or both, in the State im familiar with, and accept the oblig	02 and 607.1508, Florida Statute of Florida. Such change was a lations of, Section 607.0505, Flo	es, the above-named corputhorized by the corpora rida Statutes.	poration submits this statement for the purpose tion's board of directors. I hereby accept the a	
SIGNATURE	Signature, typed or printed name of registered ag-	ent and tilki il applicable (NOTE	Registered Agent signature requi	red when reinstaling) DATE	<del></del>
12.		D DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	
TITLE	DOOE BIOLIAND	DELÉTÉ	1.1 TITLE		☐ Change ☐ Addition
NAME STREET ADDRESS	ROOF, RICHARD 159 BOCA LAGOON DRIVE		1.2 NAME 1.3 STREET ADDRESS		
CITY-ST-ZIP	PANAMA CITY BEACH FL 3	2408	1.4 CITY-ST-ZIP		
TITLE	D	DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	ROOF, NORA		2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	PANAMA CITY BEACH FL 3	Z4U8	2. 4 CITY-ST-ZIP 3.1 TITLE		Change Addition
NAME	!		3.2 NAME	-	
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY - ST - ZIP		
TITLE		☐ DELETE	4.1 THILE		☐ Change ☐ Addition
NAME			4, 2 NAME		İ
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	4.4 CITY-ST-ZIP 5.1 TITLE		Change Addition
NAME	ļ		5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		1
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP	0	

indicated on this annual report or supplied with this mirrig does not quality for the exemption stated in Section 119.07(3)(f). Florida Statutes, I further certify that the informatic indicated on this annual report or supplied minutal 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.

GNATURE:

**SIGNATURE:**