## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

1996

**DOCUMENT #** 

DIVISION OF CORPORATIONS P95000075017 (0)

1. Corporation Name LACHNA DESWISST FLORIDA-ING

Gulf Beach Highway Properties, Inc. Fi								
Principal Place 31 WEST GI SUITE 101 PENSACOLA	arden street	Mailing Address P.O. BOX 12412 PENSACOLA FL 32582						
PENSACULA	A FL 32302				3. Date Incorporated or Qualified 09/27/1995	3a. Date of Last	Report	
2. Principal Pl	ace of Business	2a. Mailing Address 26	26			<u> </u>	Applied For Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	27			ificate of Status Desired S8.75 Additional Fee Required		
City & State		City & State	28			6. Election Campaign Financing Trust Fund Contribution  S.5.00 May Be Added to Fees  8. This corporation has liability for intangible tax under s 199.032,		
Ζιρ <b>4</b>	Country 25 9. Name and Address of C		Count	ry 		s □No	s 199.032,	
	9, Name and Address of C	current negistered Agent	8	1 Name Ri	hard R Baker	Manage Manage		
PANYKO, JOHN A 30 SOUTH SPRING STREET					ess (P.O. Box Number is Not Accepta	able)		
	COLA FL 32501		83 POR		. 4242 12358			
			8	4 City Pens	sa cola	FL 85	Sp. Code	
or register	red agent, or both, in the State o	7.0502 and 607.1508, Florida Statutes, of Florida. Such change was authorized	the above by the co	named corporarporation's boar	ation submits this statement for the p d of directors. I hereby accept the ap	urpose of changing its pointment as registere	registered office ed agent. I am	
familiar wi SIGNATURE	Thubard 1/2	f, Section 607.0505, Florida Statutes.				1/25/96		
12.	Signature, typed or pricted name of register OFFICER	RS AND DIRECTORS	13.	gent signature required	ADDITIONS/CHANGES TO OF	FICERS AND DIRECT	ORS IN 12	
THE	Pres Directo	DELETE	1. 1 101	E		Change	Addition	
NAME	Garrett WW	alton 32582 VP/S/TDELEEL	1.2 NAM	Æ				
STREET ADDRESS	PO BOX 12358	37502		ET ADORESS				
CITY - \$1 - ZIP TITLE	PENSACOIG FL	1238	1.4 C(T) 2 1 T(T)	- ST - ZIP	,	☐ Change	Addition	
NAMÉ	RICHARA K. DAKE	VP/S/7 - Div	2 2 NAV					
STREET ADDRESS	PO BOX 12358	·	1	ET ADDRESS				
City - St - ZiP	Rensawa, FL	32582	1	- S1 - <b>7</b> 1P				
THLE		☐ DELETE		.E		☐ Change	Addition	
NAME			3 2 NAM	IE .	2000017	41622		
STREET ADDRESS				EET ADDRESS	2000017 -03/13/9603	1073002		
C TY+S1+ZiP		D DELETE		-\$1-ZIP	***2 <del>00.00</del>	☐ Change	Addition	
TITLE		☐ DELETE	4 1 THTL 4 2 NAM			change	S Nontion	
NAME STREET ADDRESS:				EET ADDRESS				
City St 7iP				(-ST-ZIP				
10°LF		DELETE	5 1 TITU			☐ Changi	Addition	
NAME			5 2 NAM	16				
STHEET ADDRESS			53 STR	EET ADDRESS				
CITY - ST- ZIP			5.4 CITY	1-\$T-ZIP				
M.E		☐ DELETE	6 1 THT			Change	Addition	
NAME			6 2 NAN	· · · · · · · · · · · · · · · · · · ·				
STREET ADDRESS				EET ADDRESS				
14. Ldo herel	by certify that the information su	oplied with this filing is voluntarily furnish		r-ST-ZIP   oes not qualify fo	or the exemption stated in Section 11	19.07(3)(k), Florida Stat	tutes. I further	
certify that oath: that	at the information indicated on th t Lanuan officer or director of the	is annual report or supplemental annual e corporation or the receiver or trustee e ed, or on an attachment with an addres	report is mpowere	true and accura	ite and that my sionature shall have th	ne same legal eflect as	r made under	
SIGNAT	A.	1114			1/25/96	901-434-5	330	
SIGNA		YPED OR PRINTED NAME OF SIGNING OFFICER	OR DIRECTO	)R	Date	Daytime Pho	* /a/	