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

P95000096029 (0) DOCUMENT #

FILED Feb 20 1998 8:00am Secretary of State

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	T								
Principal Place	of Business	Mailing	Address	••				16 61111 65115 416	ID SELF COM
2831 INVERNES	SS COURT	2831 IN	2831 INVERNESS COURT						
PENSACOLA FI		PENSAC	PENSACOLA FL 32503				DO NOT WORK IN THE	.00405	
							DO NOT WRITE IN THIS SPACE		
							3. Date Incorporated or Qualified		į
			T.O. Al-D. Address				12/19/1995 4. FEI Number	1 14.	oplied For
· 	ace of Business	<u> </u>	2a. Mailing Address				59-3351796	<u> </u>	ot Applicable
Sulte, Apt. #	t Ato		Suite, Apt. #, etc.						Additional
	, e tc.	├	27				5. Certificate of Status Desired		equired
City & State			City & State				Election Campaign Financing	\$5.00	May Be
23		— ·	28				Trust Fund Contribution	*	to Fees
Zip	Country	Zip		Cou	ıntry		8. This corporation owes or has paid the c	rrent year In	langible
24	25	29		30			Personal Property Tax due June 30.		_ No
	9. Name and Address o		Agent				10. Name and Address of New Registered	Agent	
FRA	NKLIN, LARRY A				81	Name			
	INVERNESS COURT				82	Stroot Addres	ss (P.O. Box Number is Not Acceptable)		
	SACOLA FL 32503				**	Oliber Addres	SS (1.0. DOX NUMBER IS NOT NOT NOT DOX		
- -					83				
					84	City		85 Zip	Code
					ΙI	•	Fi	.	
11. Pursuant to	the provisions of Sections	607.0502 and 607.15	08, Florida Statu	ites, the a	pove	-named corpo	ration submits this statement for the purpose in's board of directors. I hereby accept the ap	of changing i	ts registered
office or re	igistered agent, or both, in t in familiar with, and accept t	he State of Florida. St he obligations of Sec	ich chang e w as tion 607.0505. F	authorize Iorida Sta	d by tutes	the corporatio	in's board of directors. I hereby accept the ap	pointment as	registered
	Transfer Williams and addopt t	no obligations of soo							
SIGNATURE	Signature, typed or printed name of reg	istered agent and title il applic	able. (NO	TE: Registers	d Age	nt signature required			
12.		ERS AND DIRECTOR		13.			ADDITIONS/CHANGES TO OFFICERS AN		
TITLE	D		☐ DELETE	1,1 T	TL€	1		Change	L Addition
NAME	FRANKUN, LARRY A			1.2 N	AME	1			
STREET ADDRESS	2831 INVERNESS COL			1.3 S	TREET	ADDRESS			
CITY-ST-ZIP	PENSACOLA FL 32503	<u> </u>			ITY-S	T-ZIP		Channa	Addition
TITLE			☐ DELETE	2.1 T				Change	Magainu
NAME				2.2 N]
STREET ADDRESS						ADDRESS			į
CITY-ST-ZIP			DELETE	-		T-ZIP		Change	Addition
TITLE			DELETE	3.1 T				☐ ciaiñe	☐ Abbillon
NAME				3.2 N					
STREET ADDRESS						ADDRESS			ļ
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NAME					AME				
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CITY-ST-ZIP			DELETE	6.1 T	ITY-S	1-417		Change	☐ Addition
TITLE				E 0.11		I			
				624	AME				
NAME CTOCCT ADDOCCC				6.2 N		ADDRESS			
STREET ADDRESS CITY-ST-ZIP				6.3 S		ADDRESS			

I nereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the informatic 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.

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