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 # 1. Corporation Name P95000096758 (4)

NORTH HILL MANOR, INC.

FILED

98 JAN 21 PM 2: 09

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Piac	ce of Business	Mailing Address		a idanida ila ibidi dirri datri ballı datri datri	. 18116 BHO (6881 BHAL (611 1881
1120 N PALAFOX ST 1120 N PALAFOX ST PENSACOLA FL 32501 PENSACOLA FL 32501					
US		US		DO NOT WRITE IN TH	HIS SPACE
				3. Date Incorporated or Qualified 01/01/1996	
2. Principal Place of Business 2a. Mailing Address				4. FEI Number	Applied For
21		26		59-3349619	Not Applicable
Suite, Apt. #, etc.		Suite, Apl #/ec.		Certificate of Status Desired	\$8.75 Additional
City & State		City & State			Fee Required
23	···	28		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the	
24	25		30	Personal Property Tax due June 30.	Yes No
	9. Name and Address of Co	urrent Registered Agent		10. Name and Address of New Register	red Agent
	OONTZ, DOUGLAS C		81 Name		
	90 BAYOU BOULEVARD		82 Street A	Address (P.O. Box Number A Not Acceptable)	
PE	NSACOLA FL 32503				
			83	$\mathbb{N} / \mathcal{I}^{T}$	
			84 City	- V 	85 Zip Code
			i I *		-L - '
11. Pursuant office or i	to the provisions of Sections 607 registered agent, or both in the	' 0502 and 607.1508, Florida Statute State of Florida, Such change was a	es, the above-named o	corporation submits this statement for the purpos oration's board of directors. I hereby accept the	e of changing its registered
agent. La	om tamiliar with, and accept the o	obligations of, Section 607.0505, Flo	rida Statutes.	Station of Station	appointment as registered
SIGNATURE	Dra My	Doughs C. 1	Koontz, P	resident 11/17 1-	20-98
12.		ed agent and title if applicable (NOTE S AND DIRECTORS	: Registered Agent algorature re	ADDITIONS CHANGES TO OFFICERS A	<u> </u>
TITLE	VIS	DELETE	1.1 TITLE	ADDITIONS/CHAINGES TO OFFICERS A	Change Addition
NAME	KOONTZ, KELLY	_	1.2 NAME		
STREET ADDRESS	1690 BAYOU BLVD		1.3 STREET ADDRESS	NONE	
CITY-ST-ZIP	PENSACOLA FL		1.4 CITY-ST-ZIP	10000	
TITLE		☐ DELETE	2.1 TITLE		Change Addition
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP			2. 4 CITY-ST-ZIP		
TITLE		DELETE	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 TITLE		Change Addition
NAME			4. 2 NAME	50000240 -01/21/98-	74150
STREET ADDRESS			4.3 STREET ADDRESS	-01/21/98-	01107006
CITY-ST-ZIP			4.4 CITY - ST - ZIP	***** <u>158.7</u>	5 ****158. (S
TITLE		☐ DELETE	5 1 TITLE		Change Addition
NAME			5 2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP		DECES	5.4 CITY-ST-ZIP		
TITLE		DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		11110
STREET ADDRESS	7		6.3 STREET ADDRESS		$(N \vee (1 \wedge 1))$

6.4 CITY - ST- 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 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 changes, or on an interment with an address.

6.3 STREET ADDRESS