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 # P95000097563 (7)

MMS PENSACOLA, INC.

TITLE

NAME

STREET ADDRESS

FILED May 06 1998 8:00am Secretary of State

Addition

Principal riac	e or Business	Mailing Address		J		
6706 N NINTH	I AVE	6706 NO NINTH AVE				
SUITE A-1 PENSAÇOLA I	ri Anena	STE A1		DO NOT WRITE IN THIS	CDACE	
US	rt 32304	PENSACOLA FL 32504 US		3. Date Incorporated or Qualified	5PACE	
**		00		12/27/1995		
9 Principal P	lace of Business	2a. Mailing Address	···	4. FEI Number	Lanting Co.	
			" Comple Tor	59-3358295	Applied For Not Applicable	
Suite Abt	t Sugar Creek Ter	Suite Ant # etc	r Creek Ter		\$8.75 Additional	
22	m, 010.	27		5. Certificate of Status Desired	Fee Regulred	
City & State	9	City & State		Election Campaign Financing	\$5.00 May Be	
23 Pens	acola, FL	28 Pensacula,	FL	Trust Fund Contribution	Added to Fees	
Zip	Country	Zip	Country	8. This corporation owes or has paid the cur		
24 32514	ESCAMBIA	29 32514	30 ESCAMbia	Personal Property Tax due June 30.	Yes No	
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Registered	Agent	
CO	RPORATION SERVICE COMPANY		81 Name			
1201 HAYS STREET			BO Chroat Ad	82 Street Address (P.O. Box Number is Not Acceptable)		
TALLAHASSEE FL 32301-2525			62 Street Ad	dress (P.O. Box Number is Not Acceptable)		
			83			
			B4 City	FI.	85 Zip Code	
11. Pursuant	to the provisions of Sections 607.0502	and 607, 1508, Florida Statut	es, the above-named co	orporation submits this statement for the purpose of	changing its registered	
office or re	egistered agent, or both, in the State of m familiar with, and accept the obliga	of Florida, Such change was a	authorized by the corpor	ration's board of directors. I hereby accept the app	ointment as registered	
1				04	1-24-98	
SIGNATURE	Signature typed or prieted name of registered again	r and title it apply able. (NOT	Ł: Registored Agent signature rec		<i>6</i> 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AND	DIRECTORS IN 12	
TITLE	DP	DELETE	1.1 TITLE		Change Addition	
NAME	CARVER, WAYNE		1.2 NAME			
STREET ADDRESS	10204 SUGAR CREEK TERRAC	Œ	1.3 STREET ADDRESS			
CITY-ST-ZIP	PE NSACOLA FL		1.4 CITY - ST - ZIP			
TITLE	DVTS	DELETE	2.1 TITLE		☐ Change ☐ Addition	
NAME	Carver, Teresa		2.2 NAME			
STREET ADDRESS	10204 SUGAR CREEK TERRAC	CE	2.3 STREET ADDRESS			
CITY-ST-ZIP	PENSACOLA FL		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			34. CITY-ST-ZIP			
TITLE		DELETE	4.1 TITLE	· · · · · · · · · · · · · · · · · · ·	☐ Change ☐ Addition	
NAME			4.2 NAME		-	
STREET ADDRESS			4.3 STREET ADDRESS		,	
CITY-ST-ZIP			4.4 CITY - ST - ZIP			
TITLE		DELETE	5.1 TITLE		☐ Change ☐ Addition	
NAME		•	5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
			1			
CITY-ST-ZIP			5.4 CITY - ST - ZIP			

DELETE

6.1 TITLE

6.2 NAME

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 changed, or on an attachment with an address.

Carver Treasures (850)484-2470