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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

1998

DIVISION OF CORPORATIONS

DOCUMENT # P96000003197 (6)

DEG INVESTMENTS OF PENSACOLA, INC.

FILED

Apr 29 1998 8:00am

Secretary of State

Principal Piace	e of Business	Mailing Address			
4300 BAYOU I	BLVD	P O BOX 30009	•		
SUITE 12 & 13		PENSACOLA FL 32503-1009			DO NOT WRITE IN THIS SPACE
PENSACOLA FL \$2503-1009					DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified
					01/03/1996
2. Principal Pl	ace of Business	2a. Mailing Address		*	4. FEI Number Applied For
21		26			59-3370229 Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired Fee Required
City & State		City & State			6. Election Campaign Financing \$5.00 May Be
23 4		28			Trust Fund Contribution Added to Fees
Zip			Countr	У	8. This corporation owes or has paid the current year Intangible
24	25 9. Name and Address of Curre	29	30		Personal Property Tax due June 30. Yes No 10, Name and Address of New Registered Agent
	MING, EDWARD P	uit uadistatan waatit	81	Name	
	O BAYOU BLVD				
SUITE 12 & 13				Street	et Address (P.O. Box Number is Not Acceptable)
1	ISACOLA FL 32503-1009		83		
			84	City	FL 85 Zip Code
11. Pursuant t	In the provisions of Sections 607.05	02 and 607 1508. Florida Statu	tes the abov	e-named	ed corporation submits this statement for the purpose of changing its registered
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.					
•	in lantings with and accept the oblig	gations of, occitor tov .0000, in	Orida Statute	· S.	
SIGNATURE	Signature, typed or printed name of registered as	gent and titln if applicable (NO	TE Ragislared Ag	ent signature	ture required when reinstaling) DATE
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	VPST	☐ DELETE	1.1 TITLE		P Change Addition
NAME	MOORE, DONALD		1.2 NAME		MOORE, DONALD
STREET ADDRESS	7465 N PALAFOX		1.3 STREE	T ADDRESS	
CITY-ST-ZIP	PENSACOLA FL 32503	DELETE	1.4 CITY -	ST-ZIP	PENSACOLA FL 32503 VPST Y Change Addition
TITLE	FLEMING, EDWARD P		2.1 TITLE		VPST
NAME	4300 BAYOU BLVD, SUITES	19813	2.2 NAME	bont40	
BENCACOLA EL OGEGO		12410			\$ 4300 BAYOU BLVD, SUITES 12 & 13 PENSACOLA, FL 32503
CITY-ST-ZIP TITLE	PD	DELETE	2. 4 CHY-	SI-ZIP	PENSACOLA, FL 32303
NAME	TIPPENS, GARY		3.2 NAME		
STREET ADDRESS	4400 BAYOU BLVD., STE 68			T ADDRESS	s i
CITY+ST-ZIP	PENSACOLA FL 32503		3.4. CITY-		
TITLE		☐ DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREE	T ADDRESS	s l
CITY-ST-ZIP			4.4 CITY-	S1-ZIP	
TITLE		☐ DELETÉ	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREE	ADDRESS	s
CITY-ST-ZIP			5.4 CITY-	ST-ZIP	
TITLE		☐ DELETE	6.1 TITLE		' L Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREE	T ADDRESS	S
CITY-ST-ZIP			6.4 CITY	ST - Z#P	

14. Thereby 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 suppliemental 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 of on an attachment with an address.