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FILED  
Apr 17 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P96000006959 (6)

1. Corporation Name

INTERNET HQ, INC.

Principal Place of Business

3919 BENBOW STREET  
PANAMA CITY BEACH FL 32408

Mailing Address

3919 BENBOW STREET  
PANAMA CITY BEACH FL 32408-6810



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 01/18/1996		3a. Date of Last Report	
21	Suite, Apt. #, etc.	26	P. O. Box 9066	4. FEI Number 593386997		Applied For Not Applicable	
22	City & State	27	City & State	5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
23	Zip	28	Panama City Beach, FL	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
24	Country	29	32417	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
25		30	USA				

9. Name and Address of Current Registered Agent

COOK, JANICE S  
3919 BENBOW STREET  
PANAMA CITY BEACH FL 32408

10. Name and Address of New Registered Agent

81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	
84	City
85	Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named 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.

SIGNATURE \_\_\_\_\_ (Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D <input type="checkbox"/> DELETE	1.1 TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	MOORE, JAMES A	1.2 NAME	LINDLEY, JANICE
STREET ADDRESS	P.O. BOX 27578 N/A	1.3 STREET ADDRESS	1313 HICKORY LANE
CITY-ST-ZIP	PANAMA CITY FL 32411	1.4 CITY-ST-ZIP	PANAMA CITY, FL 32401
TITLE	D <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MOORE, JANE	2.2 NAME	
STREET ADDRESS	P.O. BOX 27578 N/A	2.3 STREET ADDRESS	
CITY-ST-ZIP	PANAMA CITY FL 32411	2.4 CITY-ST-ZIP	
TITLE	D <input checked="" type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	COOK, C. RONALD II	3.2 NAME	
STREET ADDRESS	3919 BENBOW STREET	3.3 STREET ADDRESS	
CITY-ST-ZIP	PANAMA CITY BEACH FL 32408	3.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	COOK, JANICE S	4.2 NAME	
STREET ADDRESS	3919 BENBOW STREET	4.3 STREET ADDRESS	
CITY-ST-ZIP	PANAMA CITY BEACH FL 32408	4.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PALMER-JACKSON, BRADLEY JAMES W	5.2 NAME	
STREET ADDRESS	905 WEST 26TH STREET	5.3 STREET ADDRESS	
CITY-ST-ZIP	LYNN HAVEN FL 32444	5.4 CITY-ST-ZIP	
TITLE	D <input checked="" type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PALMER-JACKSON, LAUREN FRANCES	6.2 NAME	
STREET ADDRESS	905 WEST 26TH STREET	6.3 STREET ADDRESS	
CITY-ST-ZIP	LYNN HAVEN FL 32444	6.4 CITY-ST-ZIP	

14. I do 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.

SIGNATURE:

*Janice S. Cook*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/14/97

904-233-4912

CR2E034 (9/96)