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

CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000007512 (2)

TRANQUILLITY ON THE BEACH CORPORATION

Principal Place of Business Mailing Address 151 REGIONS WAY 151 REGIONS WAY STE A BLDG ONE DESTIN FL 32541 STE A BLDG ONE DESTIN FL 32541 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 01/22/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-3357974 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution П Added to Fees 28 Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 25 30 Personal Property Tax due June 30. ☐ Yes ∏ No. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name DEARMON, DELYS 151 REGIONS WAY 82 Street Address (P.O. Box Number is Not Acceptable) STE A BLDG ONE **DESTIN FL 32541** 83 City 84 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 lamiliar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of regetimed agent and title if applicable (NOTE: Registered Agent signature required when reinstating) CR2E034 (10/97 OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. Change DELETE 1.1 TITLE Addition TITLE RUSHING, HAROLD L NAME 1.2 NAME #127 HWY 431 N STREET ADDRESS 1.3 STREET ADDRESS HEADLAND AL 46345 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 21 TITLE **GRAHAM, SIMMIE R** NAME 2.2 NAME **ROUTE 2 BOX 34** STREET ADDRESS 2.3 STREET ADDRESS **BRUNDIDGE AL 36010** CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - \$1 - 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 DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP 20000251807^{9angs} -05/11/98--01019--021 DELETE Addition TITLE 6.1 TITLE 6.2 NAME NAME

6.3 STREET ADDRESS

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 changed or of an attachment with an address.

STREET ADDRESS

CITY-S1-2IP

4-20-92 BENGER DOOR

***150.00

FILED

May 07 1998 8:00am

Secretary of State