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May 12 1997 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P96000022412 (6)

1. Corporation Name

COMMERICAL INVESTMENT ASSOCIATES, INC.

Principal Place of Business

1002 W. 23RD STREET  
SUITE 350  
PANAMA CITY FL 32405

Mailing Address

1002 W. 23RD STREET  
SUITE 350  
PANAMA CITY FL 32405-3648

3. Date Incorporated or Qualified

03/08/1996

3a. Date of Last Report

2. Principal Place of Business

21 402 Jenks Avenue

Suite, Apt. #, etc.

22 PANAMA CITY, FLORIDA

City & State

23 Panama City, Florida

Zip

24 32401

Country

25 U.S.

2a. Mailing Address

26 P. O. Box 1987

Suite, Apt. #, etc.

27 PANAMA CITY, FLORIDA

City & State

28 Panama City, Florida

Zip

29 32402

Country

30 U.S.

4. FEI Number

89-3369382

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes

☐

Yes

☐

No

9. Name and Address of Current Registered Agent

GIOIELLO, JOHN L  
1002 W. 23RD STREET  
SUITE 350  
PANAMA CITY FL 32405

10. Name and Address of New Registered Agent

81 Name

John L. Gioiello, Esq.

82 Street Address (P.O. Box Number is Not Acceptable)

402 Jenks Avenue

83

84

City

Panama City

FL

85

Zip Code

32401

11. Pursuant to the provisions of Sections 607.0602 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 fee if applicable

(NOTE: Registered Agent's signature required when re-registering)

DATE

1-13-97

12. OFFICERS AND DIRECTORS

TITLE D  
NAME LINCOLN, JOHN D III  
STREET ADDRESS P.O. BOX 1987-N/A  
CITY-ST-ZIP PANAMA CITY FL 32402

TITLE D  
NAME LINCOLN, MARYLEE  
STREET ADDRESS P.O. BOX 1987-N/A  
CITY-ST-ZIP PANAMA CITY FL 32402

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D/P  
1.2 NAME  
1.3 STREET ADDRESS 1714 WEST 23RD ST., SUITE G  
1.4 CITY-ST-ZIP

2.1 TITLE D/VP  
2.2 NAME  
2.3 STREET ADDRESS 1714 WEST 23RD ST., SUITE G  
2.4 CITY-ST-ZIP

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
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:

John D. Lincoln III

2/18/97

904-763-6146

CR2E034 (9/96)