

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

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May 13 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998



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

DOCUMENT # K06300 (3)

Charles of Pensacola, INC.
P96000052544



% CHARLES F. JAMES, III
BOX 30017
PENSACOLA FL 32503

% CHARLES F. JAMES, III
BOX 30017
PENSACOLA FL 32503

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address	
21 Suite, Apt. #, etc.	26	27 Suite, Apt. #, etc.	30
22 City & State	28	29 City & State	31
23 Zip	25 Country	29 Zip	30 Country

3. Date Incorporated or Qualified	Applied For
6-13-1996	Not Applicable
5. Certificate of Status Desired	\$8.75 Additional Fee Required
<input type="checkbox"/>	
6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
<input type="checkbox"/>	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.	<input type="checkbox"/> Yes <input type="checkbox"/> No

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
JAMES, CHARLES F., III 4301 OLD SPANISH TRAIL PENSACOLA FL 32504				81 Name			
				82 Street Address (P.O. Box Number is Not Acceptable)			
				83			
				84 City	FL	85 Zip Code	

11. Pursuant to the provisions of Sections 607.0502 and 607.1505, 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 (NOTE: Registered Agent signature required when reconstituting) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
TITLE	DP	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JAMES, CHARLES F., III	1.2 NAME	JAMES, CHARLES F. III
STREET ADDRESS	3004 BLACKSHEAR AVENUE	1.3 STREET ADDRESS	5412 DYNASTY DR.
CITY-ST-ZIP	PENSACOLA FL	1.4 CITY-ST-ZIP	PENSACOLA, FL. 32504
TITLE	S	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JAMES, CHARLES F. III	2.2 NAME	JAMES, CHARLES F. III
STREET ADDRESS	3004 BLACKSHEAR AVE	2.3 STREET ADDRESS	5412 DYNASTY DR.
CITY-ST-ZIP	PENSACOLA FL	2.4 CITY-ST-ZIP	PENSACOLA, FL. 32504
TITLE		3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	100002524801
CITY-ST-ZIP		5.4 CITY-ST-ZIP	-05/15/98--01010--028
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	***150.00
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the indicated on this annual report or supplemental annual report is true and accurate. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes, and that my name is not on the list of officers or directors of the corporation or the receiver or trustee empowered to exercise the powers of the corporation under Chapter 607, Florida Statutes, and that my name is not on the list of officers or directors of the corporation or the receiver or trustee empowered to exercise the powers of the corporation under Chapter 607, Florida Statutes, and that my name is not on the list of officers or directors of the corporation or the receiver or trustee empowered to exercise the powers of the corporation under Chapter 607, Florida Statutes.

Handwritten initials/signature