

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

FILED

May 06 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P96000058865 (2)

1. Corporation Name

IN THE PINES OF DESTIN, INC.

Principal Place of Business

150 AZALEA DR
8A
DESTIN FL 32541
US

Mailing Address

PO BOX 5404
DESTIN FL 32541
US



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 Suite, Apt. #, etc.		26 P.O. Box 5404		07/12/1996	
22 City & State		27 Suite, Apt. #, etc.		4. FEI Number	
23 Zip		28 Destin, FL		59-3400392	
24 Country		29 32540		Applied For	
25		30 LIS		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 owes or has paid the current year Intangible Personal Property Tax due June 30.				Yes No	

9. Name and Address of Current Registered Agent

CADENHEAD, CHRIS
420 E. PINE AVE.
CRESTVIEW FL 32539

10. Name and Address of New Registered Agent

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 607.1508, 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	11 TITLE	V
NAME	RUSHING, RICHARD	12 NAME	Richard Rushing, John R.
STREET ADDRESS	1234 AIRPORT RD	13 STREET ADDRESS	1234 Airport Road
CITY-ST-ZIP	DESTIN FL	14 CITY-ST-ZIP	Destin, FL 32541
TITLE	V	21 TITLE	
NAME	CADENHEAD, CHRIS	22 NAME	
STREET ADDRESS	420 E. PINE AVE.	23 STREET ADDRESS	
CITY-ST-ZIP	CRESTVIEW FL 32539	24 CITY-ST-ZIP	
TITLE	ST	31 TITLE	T
NAME	JONES, WAYNE	32 NAME	Jones, Wayne
STREET ADDRESS	1234 AIRPORT RD.	33 STREET ADDRESS	1234 Airport Road
CITY-ST-ZIP	DESTIN FL 32541	34 CITY-ST-ZIP	Destin, FL 32541
TITLE	P	41 TITLE	P/S
NAME	RILEE, JOHN K	42 NAME	Rilee, John K.
STREET ADDRESS	3802 INDIGO CIRCLE	43 STREET ADDRESS	433 Calhoun Ave
CITY-ST-ZIP	DESTIN FL	44 CITY-ST-ZIP	Destin, FL 32541
TITLE	D	51 TITLE	
NAME	BLUE JR, F LLOYD	52 NAME	
STREET ADDRESS	1077 INDIAN TRAIL	53 STREET ADDRESS	
CITY-ST-ZIP	DESTIN FL	54 CITY-ST-ZIP	
TITLE		61 TITLE	
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 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 on an attachment with an address.

SIGNATURE:

John K. Rilee 4/27/98 850-837-8013

CR2E034 (10/97)