FILED FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham **ANNUAL REPORT** Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # P96000060605 (8) WHITE SANDS DEVELOPMENT, INC. Principal Place of Business Mailing Address 400 BÁYOU BOULEVARD BLDG. 9 PENSACOLA PL 32103 1400 BAYOU BOULEVARD 610G. 9 NENSACOLA FL 31503 3. D Mailing Address **4**. F 2. Principal Place of Business 3913 3913 MADURA Suite, Apt. #, etc. Suite, Apt. #, etc. 6. 0 City & State City & State 6. E FL 23 32<u>561</u> Country B. T 24 29 9. Name and Address of Current Registered Agent 10. P CAMPER/SIDNEY BYIII URT 4400 BAYOU BOULEVARD BLDG. 9 PENSACOLA EL 32500 Street Add 82 83 Zip Code 32561 Gout Breeze Sections 607 0502 and 607 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered by the corporation obligations of Section 607 0505, Florida Statutes. 11. Pursuant to the provisions of Kurs LRUEGER SIGNATURE 12. OFFICERS AND DIRECTORS 13. DELETE TITLE 1.1 TITLE CAMPER, SIDNEY D III NAME 1.2 NAME 4400 BAYON BOULEVARD BLDG. 9 1.3 STREET ADDRESS STREET ADDRESS PENGACQLA FL 32503 CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE TITLE 2.1 TITLE KREUGER, KURT A NAME 2.2 NAME

## Mar 19 1998 8:00am Secretary of State

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DO NOT WRITE IN TH	IS SPACE
Date Incorporated or Qualified D7/11/1996	
El Number	Applied For
59-3391513	Not Applicable
Certificate of Status Desired	\$8.75 Additional Fee Required
lection Campaign Financing rust Fund Contribution	\$5.00 May Be Added to Fees
his corporation owes or has paid the Personal Property Tax due June 30.	current year Intangible Yes 🔲 No
lame and Address of New Registered Agent	
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March 16,1998 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition Change Addition 3913 WEST MADURA ROAD STREET ADDRESS 2 3 STREET ADDRESS **GULF BREEZE FL 32561** 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-ST-ZIP DELETE Change ☐ Addition 4.1 TITLE TITL F 4. 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELF 16 Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 54 CITY-S1-ZIP DELETE Change TITLE 61 TITLE 6.2 NAME NAME STREET ADDRESS 63 STREET ADDRESS 64 CITY-ST-ZIP CITY-ST-ZIP

14. Thereby 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 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 coreporation or the receiver or trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changing or on an attachment with an address.

March 16,1998 (850) 934-0741 SIGNATURE: