

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

FILED

97 JUN 27 PM 2:07

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P96000063823 (4)

1. Corporation Name

SOUTH WALTON PROPERTIES, INC.



Principal Place of Business

1713 COUNTRY CLUB DR  
LYNN HAVEN FL 32444

Mailing Address

1713 COUNTRY CLUB DR  
LYNN HAVEN FL 32444-1983

3. Date Incorporated or Qualified

07/30/1996

3a. Date of Last Report

4. FEI Number

☒ Applied For  
☐ Not Applicable

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

24 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

PO Box 18577

Panama City Beach, FL

32417 USA

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

10. Name and Address of New Registered Agent

9. Name and Address of Current Registered Agent

HESS, BRIAN D  
9108 FRONT BEACH ROAD  
PANAMA CITY BEACH FL 32407

81 Name

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

83

84 City

FL

85 Zip Code

1. 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 fee if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D HANCOCK, KAY ☒ DELETE  
NAME  
STREET ADDRESS 1713 COUNTRY CLUB DR  
CITY-ST-ZIP LYNN HAVEN FL 32444

TITLE D FOSTER, RACE ☐ DELETE  
NAME  
STREET ADDRESS 1713 COUNTRY CLUB DR  
CITY-ST-ZIP LYNN HAVEN FL 32444

TITLE D KENNER, HAMILTON ☒ DELETE  
NAME  
STREET ADDRESS 1713 COUNTRY CLUB DR  
CITY-ST-ZIP LYNN HAVEN FL 32444

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☒ Addition  
1.2 NAME Faye Bernstein - N/A  
1.3 STREET ADDRESS PO Box 18577  
1.4 CITY-ST-ZIP Panama City Beach, FL 32417

2.1 TITLE ☐ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS 200002229212--0  
2.4 CITY-ST-ZIP -07/02/97--01077--014  
\*\*\*\*165.00 \*\*\*\*165.00

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

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

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

6.1 TITLE ☐ Change ☐ Addition  
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

KENNER, HAMILTON

25697 230-3688

CR2E034 (9/96)