## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999. AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## FILED Jul 20, 1999 8:00 am Secretary of State 07-20-1999 90017 046 \*\*\*550.00

DOCUMENT #  1. Corporation Name	P96000063837

WATTSOUND OF SOUTH WALTON, INC.

SSAGE NOW COAN UNIT 6 SEAGROVE BEACH FL 32499  DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified  07/30/1996  2. Principal Place of Business									
SEAGROVE BEACH FL 23459  SEAGROVE BEACH FL 23459  DO NOT WRITE IN THIS SPACE  3. Data Incorporated or Gualified  OT/30/1998  2. Principal Piace of Business 2. Address 4. FEL Number 19 20 21 21 21 27 20 20 20 20 20 20 20 20 20 20 20 20 20	Principal Place	of Business	Mailing Address						
2. Principal Place of Business							1		
2. Principal Place of Business 2. 2a. Mailing Address 2. 4. FEI Number 4. FEI Number 5. Applied For 1917 1. 2a. Mailing Address 2. 2b. Mailing Address 2. 2b. Mailing Address 3. 2b. Ma	SEAGROVE BE	ACH FL 32459	SEAGROVE BEACH FL 32	459			DO NOT WRITE IN	THIS SPACE	
2. Principal Place of Business									
2. Principal Place of Business   2a. Mailing Address   5. Social							·	<b>\</b>	
Sullo, Apt. #, etc.	2 Principal Pla	age of Business	2a Mailing Address					Applied For	
Suite, Apt. #, etc.    Suite, Apt. #, etc.	—, ''	ace.or business	_ ·				1 *-	<del></del>	
City & State								\$8.75 Additional	
City & State  Ci		,, 4.0.	<del>  </del>				5. Certificate of Status Desired L	Fee Required	
23		,		-			6. Election Campaign Financing \$5.00 May Be		
Zip	<del></del>		<u> </u>						
BOWEN, FOREST M 620S N LAGOON DR PANAMA CITY BEACH FL 32408  10. Name and Address of New Registered Agent  83  44 Ony  FL 05  15. Name  16. Name and Address of New Registered Agent  83  44 Ony  FL 05  83  45 Ony  FL 05  85 Zip Code  16. 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 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, 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, 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, and accept the obligations of, section 607 0506, Florida Statutes.  880ATURE  \$12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  172. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  173. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  174. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  175. NAME  175. NAME		Country		Cou	ntry		8. This corporation owes the current y	ear	
BOWEN, FOREST M 6205 N LAGOON DR PANAMA CITY BEACH FL 32408  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 list registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the obligation of sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation's board of directors. I hereby accept the obligation of sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation's board of directors. I hereby accept the obligation of sections 607.0502, Florida Statutes, authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am femiliar with, and accept the obligation of section 607.0502, Florida Statutes, authorized by the corporation's board of directors. I hereby accept the appointment as registered agent of the provision of section 607.0502, Florida Statutes, authorized by the corporation's board of directors. I hereby accept the appointment as registered agent of the provision of section 607.0502, Florida Statutes, authorized by the corporation's board of directors. I hereby accept the appointment as registered agent and the supplier of the proposed and sections of the provision of section 607.0502, Florida Statutes, and the proposed and of directors. I hereby accept the appointment as registered agent and the proposed and sections of the proposed accept the proposed authorized by the corporation's board of directors. I hereby accept the appointment as registered agent and the supplier and sections of the proposed accept the proposed	24	25	29	30			Intangible Personal Property.	Yes No	
BOWEN, FOREST M 8205 N LAGOON DR PANAMA CITY BEACH FL 32408    Earl		9. Name and Address of Current	Registered Agent	• •			10. Name and Address of New Regis	tered Agent	
Size   Addition   Size   Addition   Size   Addition   Size   Addition   Add					81	Name			
## PANAMA CITY BEACH FL 32408    Sa					82	Street Addr	ress (P.O. Box Number is Not Acceptable)		
11. Pursuant to the provisions of sections 607 0502 and 607 1506. Florids 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 Florids. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, and accept the obligations of, section 607 0505, Florids Statutes.  SIGNATURE						Oll Oct / tool			
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 and termiliar with, and accept the obligations of, section 607 0505, Florida Statutes.  SIGNATURE  Signature, speed or perise name of implittered agent and title if applicables. (MOTE Registered Agent algorithm required when releasing)  DFFICENS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE  12. OFFICERS AND DIRECTORS IN 12. TITLE  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE  12. OFFICERS AND DIRECTORS IN 12. TITLE  13. TITLE  14. TITLE  15. TITLE  16. DELETE  17. TITLE  17. OFFICERS AND DIRECTORS IN 12. TITLE  18. OFFICERS AND DIRECTORS IN 12. TITLE  19. OFF	PAN	AMA CITY BEACH FL 32408			83		<del></del>		
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office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I nereby accept the approximent as registered agent, and accept the obligations of, section 607.0505, Florida Statutes.  SIGNATURE  Signature, typed or printed rates of registered agent and title if applicable. (NOTE: Registered Agent algentative required when reinstating)  Delette 1.1 ITITLE  D Change Addition NAME STREET ADDRESS CITY-ST-ZIP  D DELETE 2.1 TITLE  D Change Addition NAME STREET ADDRESS CITY-ST-ZIP  D D DELETE 2.2 TITLE  D Change Addition NAME STREET ADDRESS CITY-ST-ZIP ANAMA CITY BEACH FL 32408  DELETE 2.3 STREET ADDRESS CITY-ST-ZIP  ANAME 3.3 STREET ADDRESS CITY-ST-ZIP  D D DELETE 3.1 TITLE  D Change Addition NAME 3.3 STREET ADDRESS CITY-ST-ZIP  NAME 3.3 STREET ADDRESS CITY-ST-ZIP  NAME 4.2 NAME 3.3 STREET ADDRESS CITY-ST-ZIP  NAME 3.3 STREET ADDRESS CITY-ST-ZIP  DELETE 4.1 TITLE  Addition NAME 3.3 STREET ADDRESS CITY-ST-ZIP  TITLE  NAME 3.3 STREET ADDRESS CITY-ST-ZIP  TITLE  DELETE 4.1 TITLE  Addition NAME 3.3 STREET ADDRESS CITY-ST-ZIP  TITLE  DELETE 5.1 TITLE  Change Addition Addition NAME 3.3 STREET ADDRESS CITY-ST-ZIP  TITLE  DELETE 6.1 TITLE  DELETE 6.1 TITLE  Change Addition Addition NAME 3.3 STREET ADDRESS CITY-ST-ZIP  TITLE  DELETE 6.1 TITLE  Change Addition Addition NAME 3.3 STREET ADDRESS CITY-ST-ZIP  TITLE  DELETE 6.1 TITLE  Change Addition Addition NAME 3.3 STREET ADDRESS CITY-ST-ZIP  TITLE  DELETE 6.1 TITLE  Change Addition Addition NAME 3.3 STREET ADDRESS CITY-ST-ZIP  TITLE  DELETE 6.1 TITLE  Change Addition Addition Addition NAME 6.3 STREET ADDRESS CITY-ST-ZIP  TITLE  DELETE 6.1 TITLE  Change Addition Addition Addition NAME 6.3 STREET ADDRESS CITY-ST-ZIP  TITLE  DELETE 6.1 TITLE  STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP  TITLE  STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP  TITLE  STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP  TITLE  STREET ADDRESS 6.3 S					04	City		FL   S   Z   S   S	
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TITLE	0.0.0.0.0.0.0				red A	gent signature req	unceun		
NAME BOWEN, FOREST M \$TREET ADDRESS CITY-ST-ZIP PANAMA CITY BEACH FL 32408  DELETE TITLE WATTS, JAMES M ZSTREET ADDRESS CITY-ST-ZIP PANAMA CITY BEACH FL 32405  TITLE D DELETE ZSTRINE ZSTREET ADDRESS CITY-ST-ZIP TITLE D DELETE 31 TITLE D DELETE 31 TITLE D DELETE 31 TITLE D Change Addition Addition AME STREET ADDRESS CITY-ST-ZIP TITLE D DELETE 31 TITLE D Change Addition Addition Addition ASTREET ADDRESS CITY-ST-ZIP TITLE D DELETE 41 TITLE ASTREET ADDRESS CITY-ST-ZIP TITLE D DELETE ASTREET ADDRESS CITY-ST-ZIP TITLE DELETE ASTREET ADDRESS CITY-ST-ZIP TITLE DELETE SSTREET ADDRESS CITY-ST-ZIP TITLE SSTREET ADDRESS CITY-ST-ZIP TITLE DELETE SSTREET ADDRESS CITY-ST-ZIP TITLE SSTREET ADDRESS SSTREET ADDRESS SSTREET ADDRESS CITY-ST-ZIP TITLE SSTREET ADDRESS SSTREET ADDRESS SSTREET ADDRESS CITY-ST-ZIP TITLE SSTREET ADDRESS SS	12.			_		-	ADDITIONS/CHANGES TO OFFICE		
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44 the set in the set was interested with this filing does not qualify for the example protection 110 07/3\(\delta\)). Florida Statutes, I further cartify that the information	CITY-ST-ZIP		Abita Malia - A MA				ation 110 07/2/i) Florido Statutos 15 abor	certify that the information	

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:

CR2E034 (5/99)