## 04-30-1999 90042 016 \*\*\*150.00

## Apr 30, 1999 8:00 am Secretary of State

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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

1999		DIVISION OF CORPORATIONS		
DOCUMENT # 1. Corporation Name DOJOLE, INC.	P9600008	1409		
Principal Place of Business	N	failing Address		
19981 PANAMA CITY BEACH PAR PANAMA CITY BEACH FL 32413		9981 PANAMA CITY BEACH PARKWAY ANAMA CITY BEACH FL 32413		

Principal Place	ace of Business Mailing Address			I 1880/884 Me (atte sint sain asin esta) isian non sisti asid sain sai				
19981 PANAMA CITY BEACH PARKWAY PANAMA CITY BEACH FL 32413 PANAMA CITY BEACH FL 32413				DO NOT WRITE IN THIS SPACE				
	•						3. Date Incorporated or Qualifed	
						Ì	09/30/1996	
2. Principal Pl	ace of Business	e of Business 2a. Mailing Address				4. FEI Number Applied For		
21		26				<b>59-3409358</b> Not Applicable		
Suite, Apt.	#, etc.	Suite, Apt. #, etc.					5. Certificate of Status Desired  \$8.75 Additional	
22		27	27				Fee Required	
City & State	•		City & State			6. Election Campaign Financing \$5.00 May Be		
23		. 28					-Trust Fund Contribution - Added to Fees-	
Zip	Country	Zi	Zip Country			8. This corporation owes the current year Intangible		
24	25	29	<u> </u>			Personal Property Tax. Yes No		
Name and Address of Current Registered Agent				T		10. Name and Address of New Registered Agent		
1991 14440 1407 0			81	Name				
	IAMS, JACK G	ALA V		82	Street A	Addres	ss (P.O. Box Number is Not Acceptable)	
19981 PANAMA CITY BEACH PARKWAY								
PANAMA CITY BEACH FL 32413				83	B3 .			
			•	84	City		FL 85 Zip Code	
44.5		NO CO7	4500 Fladda Ctabridge 4	1				
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 AN	ND DIRECT		13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	ST		☐ DELETE	1.1 TITLE			☐ Change ☐ Addition	
NAME	LEE, DEL		İ	1.2 NAME				
STREET ADDRESS	REETADDRESS 19981 PANAMA CITY BEACH PARKWAY 1.3 S		1.3 STREE	T ADDRESS				
CITY-ST-ZIP	PANAMA CITY BEACH FL 324	13		1.4 CITY-S	T-ZIP			
TITLE	Р		☐ DELETE	2.1 TITLE	Т		☐ Change ☐ Addition	
NAME	DOZIER, WILLIAM R		Ī	2.2 NAME				
STREET ADDRESS	19981 PANAMA CITY BEACH I	PKWY		2.3 STREE	T ADDRESS			

PANAMA CITY BEACH FL 32413 2. 4 CITY-ST-ZIP CITY-ST-ZIP Addition □ DELETE ☐ Change TITLE 3.1 TITLE 3.2 NAME JOHNSON, RONNIE NAME 3.3 STREET ADDRESS STREET ADDRESS 19981 PANAMA CITY BEACH PKWY CITY-ST-ZIP PANAMA CITY BEACH FL 32413 3.4. CITY-ST-ZIP □ DELETE Change ☐ Addition 4.1 TITLE TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP ☐ DELETE ☐ Change ☐ Addition 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP □ DELETE 6.1 TITLE ☐ Change Addition TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP 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, with all other like empowered.

SIGNATURE: