SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION **ANNUAL REPORT**

1997



FLORIDA DEPARTMENT OF STATE

FILED

Aug 13 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P96000085905 (3)

ACUAHIUS WA	iter spuris, in	<i>i</i> C.							
Principal Place of Busine	ess	Mailing Addre	Mailing Address 301 NAUTILUS STREET PANAMA CITY BEACH FL 32413			-{			0011 0010 1 0111 10 0 1
301 NAUTILUS STREET PANAMA CITY BEACH F	L 32413					DO NOT WRITE IN THIS SPACE			
						3. Date Incorporated or Qualified 10/14/1996 4. FEI Number	3a. Da	e of L	ast Report
2. Principal Place of Business		26	2a, Mailing Address 26			4. FEI Number 59-341326	lo		Applied For Not Applicable
Suite, Apt. #, etc.		27	Suite, Apt. #, etc.			5. Certificate of Status Desired			75 Additional ee Required
City & State		City & Sta	City & State			6. Election Campaign Financing Trust Fund Contribution St.00 May Be Added to Fees			
Zip 24	Country 25	Zip Coi 29 30			8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes X. No				
g, Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent				
Johnson, Bertha L 301 Nautilus Street					Name				
PANAMA CITY BEACH FL 32413				82	Street Address (P.O. Box Number is Not Acceptable)				
		-		83					
				84	City	***************************************	FL	85	Zip Code
office or registered a	isions of Sections 607. agent, or both, in the St with, and accept the ob	tate of Florida. Such ch oligations of, Section 6	nange was authorize	ed by	the corporation	oration submits this statement for the proof's board of directors. I hereby accep	urpose of t the appo	chang intme	ing its registered nt as registered

agent. I a	m familiar with, and accept the obligations of, S	ection 607.0505, Flo	rida Statutes.	2011 2011 2011 2011 2011 2011 2011 2011	,			
SIGNATURE	Johnson, BERTHA L.	The state of the s						
12,	Signature, typed or printed name of registered agent and title if applicable (NO OFFICERS AND DIRECTORS		Registered Agent signature requi	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS I	DATE CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	Б	☐ DELETE	1.1 TITLE	Change [Addition			
NAME	JOHNSON, VICKI L		1.2 NAMÉ					
STREET ADDRESS	301 NAUTILUS STREET		1.3 STREET ADDRESS					
CITY-ST-ZIP	PANAMA CITY BEACH FL 32413		1.4 CITY-ST-ZIP					
TITLE	D	☐ DELETE	2.1 TITLE	☐ Change	Addition			
NAME	CAPPO, JANICE E		2.2 NAME					
STREET ADDRESS	6861 MADDOX ROAD		2.3 STREET ADDRESS					
CITY-ST-ZIP	MORROW GA 30260		2.4 CITY-ST-ZIP					
TITLE	D	DELETE	3.1 TITLE	☐ Change ☐	Addition			
NAME	Johnson, Henry E		3.2 NAME					
STREET ADDRESS	301 NAUTILUS STREET		3.3 STREET ADDRESS					
CITY-ST-ZIP	PANAMA CITY BEACH FL 32413		3.4. CITY - ST - ZIP					
TITLE	D	DELETE	4.1 TITLE	Change [Addition			
NAME	Johnson, Bertha L		4.2 NAME					
STREET ADDRESS	301 NAUTILUS STREET		4.3 STREET ADDRESS					
CITY-ST-ZIP	PANAMA CITY BEACH FL 32413		4.4 CITY-ST-ZIP					
TITLE		☐ DELĒTE	5.1 TITLE	Change L	Addition			
NAME			5.2 NAME					
STREET ADDRESS			5.3 STREET ADDRESS					
CITY-ST-ZIP			5.4 CITY-ST-ZIP					
TITLE		DELETE	6.1 TITLE	☐ Change	Addition			
NAME			6.2 NAME					
STREET ADDRESS			6.3 STREET ADDRESS					
CITY_CT_TIP			6.4 DITY, CT. 7(D					

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.