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

**PROFIT** CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

P96000094930 (0) **DOCUMENT #**1. Corporation Name

MID-BAY TIMBER AND LAND COMPANY

Principal Place of Business

4444 EAST MAIN SHIS DATIONAL

Mailing Address

THE EAST WHAT SHEED DEDICATE

**FILED** May 08 1998 8:00am Secretary of State



NO. 333 NCEVILLE FL 32578		NO. 333 NICEVILLE FL 32578		DO NOT WRITE IN THIS SPACE		
				DO NOT WRITE IN THIS SPACE  3. Date incorporated or Qualified		
				11/20/1996		
-	lace of Business	2a. Mailing Address	20 EAST	4. FEI Number	Applied For	
Suite, Apt.	HWY 26 EAST	26 4506 HWT Suite, Apt. #, etc.	Co cult		Not Applicable \$8.75 Additional	
22	suite 250	27 SUITE 2	<u> నం</u>	5. Certificate of Status Desired	Fee Required	
	reviue fl	28 Niceville	FL	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
2ip 32S	78 25 Country USA		Country	<ol> <li>This corporation owes or has paid the Personal Property Tax due June 30.</li> </ol>	☐ Yes ☐ No	
9. Name and Address of Current Registered Agent			81 Name	10. Name and Address of New Registered Agent  11 Name		
ALFORD, STEPHEN M 1114 EAST JOHN SIMS PARKWAY						
NO. 333				dress (P.O. Box Number is Not Acceptable)		
NIC	EVILLE FL 32578		83			
			84 City		85 Zip Code	
11. Pursuant to	to the provisions of Sections 607.050 egistered agent, or both, in the State	2 and 607.1508, Florida Statutes of Florida, Such change was au	the above-named co	orporation submits this statement for the purposeration's board of directors. I hereby accept the	e of changing Its registered appointment as registered	
	m familiar with an amount the Migr	atio Section 607.0505, Flori	da Statutes.	ation's board of directors. I hereby accept the	CE	
SIGNATURE	Signature, yiped or print it name of registered ago	nt and the if applicable (NOTE:	Peristered Agent signature req	juired when reinstating) DA	<u> </u>	
12.	OFFICERS AN		13.	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12	
TITLE	D	DELETE	1.1 TITLE		Change Addition	
NAME	ALFORD, STEPHEN M	****	1.2 NAME	••		
STREET ADDRESS	1114 EAST JOHN SIMS PARK	(WAY	1.3 STREET ADDRESS			
CITY-ST-ZIP	NICEVILLE FL 32578		1.4 CITY - ST - ZIP			
TITLE		☐ DELETE	2.1 TITLE		Change Addition	
HAME			2.2 NAME			
STREET ADDRESS			2.3 STREET ADDRESS	f.		
CITY-ST-ZIP		DELETE	2. 4 CITY - ST - ZIP 3.1 TITLE		☐ Change ☐ Addition	
NAME			3.2 NAME		<b>3</b> ************************************	
STREET ADDRESS			3.3 STREET ADDRESS			
CITY-ST-ZIP			3.4. CITY+ST-ZIP			
TITLE		DELETE	4.1 TITLE		Change Addition	
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP			4.4 CITY - ST - ZIP			
TITLE		DELETE	5.1 TITLE		Change Addition	
NAME			52 NAME			
STREET ADDRESS			5 3 STREET ADDRESS			
CITY-ST-ZIP		DELETE	5.4 CITY-ST-ZiP 6.1 TITLE		☐ Change ☐ Addition	
NAME			6.2 NAME		Change Addition	
STREET ADDRESS			6.3 STREET ADDRESS			
SINEEL NUMBERS			U.S SINEE! ALAJNESS			

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 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 rocoid 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 attraction with an address.

4-25-58