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

DOCUMENT # P96000095667 (7)

241 DEVELOPMENT CORPORATION

Principal Place of Business

Mailing Address

FILED May 11 1998 8:00am Secretary of State



1324 South Adams Street Tallahassee FL 32301		1324 SOUTH ADAMS STREET TALLAHASSEE FL 32301			DO NOT WIDTE IN THE	0.004.05	
					DO NOT WRITE IN THI: 3. Date Incorporated or Qualified 11/22/1996	5 SPACE	
2. Principal Place of Business 28. Mailing Address					4. FEI Number		oplied For
	I. Tarragona	26 1201 N. Tarragona			59-3434544		ot Applicable
Suite, Apt. #, etc.		Suite, Apt #, etc.					Additional
22		27			5. Certificate of Status Desired	Fee Re	equired
City & State 23 Pensacola, FL		City & State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees		
23 Pensac	Country	28 Pensacola, F	ىلا. Countr	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·		
Zip 32501	25	32501	30		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes X No		
, ,	nt Registered Agent			10. Name and Address of New Registered Agent			
WF	BSTER, WILLIAM THOMAS		81				
1324 SOUTH ADAMS STREET				Stev	en P. DelGallo		
TALLAHASSEE FL 32301				Street /	Address (P.O. Box Number is Not Acceptable) N. Tarragona		
THE WITHOUTE TE DEAD!				1 200	· ··· razzaggia		
				<u> </u>			
			84		acola F		Code 2501
11. Pursuant to	the provisions of Sections 607.05	02 and 607.1508, Florida Statute	es, the above	re-named	corporation submits this statement for the nurpose	of changing it	ts registered
office or registered agent, or bolt 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		gamena 0,, 000mm 00 1,0000, 17.0	TOG Statut		04/	30/98	
	Signature, typed or printed name of registered ap	jent and title if applicable (NOTE	Registered Ag	jent signature	required when reinstating) DATE		
12.	OFFICERS AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTOR	RS IN 12
TITLE	D	X DELETE	1.1 TITLE		D	☐ Change	Addition
NAME	Webster, William Thom/	AS	1.2 NAME		DelGallo, Steven P.		
STREET ADDRESS			1.3 STREE	T ADDRESS	1201 N. Tarragona		
CITY-ST-ZIP	TALLAHASSEE FL 32301		1.4 CITY-	ST-7IP	Pensacola, FL 32501		
TITLE	T	☐ DELETE				Change	Addition
NAME	SCHWEIZER, W. TODD		2.2 NAME				
STREET ADDRESS	1324 SOUTH ADAMS STRE	ET	2.3 STREET ADDRESS				
CITY-ST-ZIP	TALLAHASSEE FL 32301		2. 4 CITY - ST- ZIP				
TITLE	DELETE		3.1 TITLE			Change	Addition
NAME			3.2 NAME				
STREET ADDRESS			3.3 STREE	T ADDRESS			
CITY-ST-ZIP			3.4. CITY-	·ST-ZIP			
TITLE	DELETE		4.1 TITLE			Change	Addition
NAME			4. 2 NAMI				
STREET ADDRESS			4.3 STREE	T ADDRESS			
CITY-ST-ZIP			4.4 CITY-	ST-ZIP			
TITLE		DELETE				☐ Change	Addition
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREE	T ADDRESS			
CITY-ST-ZIP			5.4 CITY-				
TITLE		DELETE 6.			and the second s	Change	Addition
NAME			6.2 NAME				
STREET ADDRESS		4		T ADDRESS			
			6.4 CITY-				
CITY-ST-ZIP	artify that the information supplied	with this filling doos not qualify fo			ed in Section 119 07/3/(i) Florida Statutes I further	cortifu that the	information

4. 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 apacity bent with an address.

04/30/98