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 # P96000102030 (9)

ABC OF PENSACOLA, INC.

Principal Place of Business

Mailing Address

FILED May 06 1998 8:00am Secretary of State



PENSACOLA I		PENSACOLA FL 32504		
LINDAGOCA	L SECOT	TENONOUR TE VEZOT		DO NOT WRITE IN THIS SPACE
				3. Date Incorporated or Qualified 12/18/1996
2. Principal P	ace of Business	2a. Mailing Address		4. FEI Number Applied For
21 399	5 Scenic Hwy. Cir	26 3995 Scen	ic Hwy.	59-3425456 Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired See Required Fee Required
City & State		Cgty & State	h = 1	Election Campaign Financing \$5.00 May Be
23 Pen 5	bacola, Fl.	28 Pensacolo	4 F1	Trust Fund Contribution Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the current year Intangible
24 3 2 5		29 32504 30	1 43A	
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent
HINSON, LINDA C				9
3935 SCENIC HIGHWAY			82 Street	t Address (P.O. Box Number is Not Acceptable)
PENSACOLA FL 32504				
			83	
			84 City	FL 85 Zip Code
11. Pursuant to the provisions of Soctions 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, typod or printed name of registered agent. OFFICERS AND		legistered Agent signature	re required when reinstaling) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
12.	D OFFICERS AND	DIMECTORS	1.1 TITLE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
NAME	CARR, A. B	A Section	1.2 NAME	Tohn a cor
STREET ADDRESS	111 DEL BARCO LANE		1.3 STREET ADDRESS	landa kii a k alud Suile 33 h
CITY-ST-ZIP	MILTON FL 32570	!	1.4 CITY-ST-ZIP	Pensacola, Pl. 32503
TITLE	D	DELETE	2.1 TITLE	Change N Addition
NAME	HINSON, LINDA C		2.2 NAME	Cathy C. Roche
STREET ADDRESS	3535 SCENIC HIGHWAY		2.3 STREET ADDRESS	8080 Baywind Cir.
CITY-ST-ZIP	PENSACOLA FL 32504		2 4 CITY-ST-ZIP	Pensacola, Fl. 32514
TITLE	4 -	DELETE	3 1 TITLE	Change Addition
NAME	John B. Com		3.2 NAME	Hinson, Linda C.
STREET ADDRESS			3.3 STREET ADDRESS	3995 Scenie Hwy. Cir.
CITY-ST-ZIP	·		3.4. CITY-ST-ZIP	3995 Scenie Hwy. Cir. Pensacola, Fl. 32504
TITLE	D 0 0	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME	Cathy C. Roche		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	•		5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP		- I pri see	5.4 CITY - ST - ZIP	
TITLE		☐ DELETE	6.1 TITLE	Change Addition
NAME			6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	
CITY-ST-ZIP			6.4 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. $(\mathcal{L}_{1}, \mathcal{L}_{2})$ 11:120 1 11: 101 11/20/08 850-1/22