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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State-DIVISION OF CORPORATIONS

1998

DOCUMENT # P97
1. Corporation Name
CMS DEVELOPMENTS, INC. P97000027222 (3)

FILED Oct 09 1998 8:00am Secretary of State

Darie 20 1998 850-262:3606



4				
Principal Place of Business	Mailing Address			
8906 ST ANDREWS DR 8806 ST ANDRE		/S DR		
DESTIN FL 32541	DESTIN FL 32541			
				DO NOT WRITE IN THIS SPACE
				3. Date Incorporated or Qualified
O Discount Discount Discount	2a. Mailing Address		 	03/21/1997 4. FEI Number Applied For Applied For
h				59-3446326 Not Applicable
21 26 Suite, Apt. #, etc. Suite, Apt. #, etc.				\$8.75 Additional
22 27				5. Certificate of Status Desired Fee Regulred
City & State City & State				6. Election Campaign Financing \$5.00 May Be
23	28			Trust Fund Contribution Added to Fees
Zip Country	Zip	Cou	ntry	8. This corporation owes or has paid the current year Intensible
24 25		30		Personal Property Tax due June 30. Yes No
9. Name and Address of Current	Registered Agent			10. Name and Address of New Registered Agent
UNDERWOOD, SALLY H			81 Name	
8806 ST ANDREWS DR			82 Street A	Address (P.O. Box Number is Not Acceptable)
DESTIN FL 32541				
			83	
			84 City	85 Zip Code
				FL 10 24 Cook
office or registered agent, or both, in the State of	if Florida. Such change was at	uthorize	d by the corp	corporation submits this statement for the purpose of changing its registered coration's board of directors. I hereby accept the appointment as registered
agent. I am familiar with, and accept the obligat	ions of, Section 607.0005, Flo	rida Stat	utes.	, , , , ,
SIGNATURE	- W-z-	Davidson		required when reinstating) DATE
Signature: typind styrited name of registered agent 12. OFFICERS AND		13.	Agent signature	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
THE TO SERVICE A	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	1,1 Tr	LF	Change Addition
NAME KINTHY H. WINELMOS	$\lambda \lambda$ —.	1.2 N/		
NAME . STREET ADDRESS TO BOOK ST. BACKENS F)r i	1	REET ADORESS	
CITY-ST-ZIP - Deblin FL 3254	[.]		[Y-ST- <i>T</i> IP	
TITLE	DELETE	2.1 10		Change Addition
NAME		2.2 N/	JME .	
STREET ADDRESS		2351	REET ADDRESS	
CITY-ST-ZIP		2 4 0	1Y-ST-7IP	<u>.</u>
TITLE	DELETE	3.110	LF	☐ Change ☐ Addition
NAME		3.2 N/	ME	
STREET ADDRESS		3.3 \$1	REET ADDRESS	
CITY-S1-ZIP		3.4. C	1Y-ST-2IP	
TITLE	☐ DELETE	4.1 16	'LF	. [.] Change L. Addition
NAME		4. 2 N	AME	
STREET ADDRESS		4.3 ST	REE1 ADURESS	
CITY-\$1-2IP			IY-SI-ZIP	
TITLE	☐ DELETE	. 5.1 TO	LE	Change Addition
NAME		5.2 NA	ME	100002660921 -10/09/9801086 03 5
STREET ADDRESS		5.3 S1	REET ADDRESS	***150.00
CITY-ST-ZII'		_	IY-\$T-ZIP	l
TITLE	DELFTE	6.1 TI		☐ Change ☐ Addition
NAME		6.2 NA		0E .
STREET ANDRESS			REE1 ADDRESS	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
CITY-\$1-ZIF	1 1 2 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	6.4 CI	Y-\$1-2IP	od in Caption 110 07/200 Florida Statutas I further sertifu that the information

14. 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 informatio 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 eath; 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. A. M. all the Page 1 on A SALLY IL HUTE PURCO