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

**PROFIT CORPORATION ANNUAL REPORT** 

**19**98

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

**FILED** 

Jun 02 1998 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000048796 (1)

LEWIS D. HALL AMUSEMENTS, INC. Principal Place of Business Mailing Address 2119 AIRPORT BLVD. 2119 AIRPORT BLVD. PENSACOLA FL \$2547 PENSACOLA FL 32547 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/02/1997 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 59-<u>3447543</u> 21 Not Applicable Suite, Apt. #, etc. Suite, Apt. #. etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution 23 Added to Fees 28 Zip Country Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. Yes Yes 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent **B1** Name JESM**O**NTH, RICHARD E 217 A. EAST INTENDENCIA STREET 82 Street Address (P.O. Box Number is Not Acceptable) PENSACQLA FL 32501 83 84 City Zip Code 85 11. Pursuant to the provisions of Sections 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 amiliar with, and accept the ibligators of Section 607.0505, Florida Statutes. (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change \_\_\_ Addition 11 117LE TITLE HALL, LEWIS D NAME 1.2 NAME 3240 BENT OAK ROAD STREET ADDRESS 1.3 STREET ADDRESS PENSACOLA FL 32526 City-St-7iP 1.4 CITY - ST - ZIP DELETE Change 2.1 TITLE Addition TITLE HALL, ELIZABETH A NAME 2.2 NAME 3240 BENT OAK ROAD STREET ADDRESS 2.3 STREET ADDRESS PENSACOLA FL 32526 2. 4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change 31 TITLE . Addition TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE 4.1 TITLE Addition TITLE 4. 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ DELETE TITLE 5.1 TITLE 5.2 NAME NAME 5 3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Addition TITLE 61 TITLE 6.2 NAME NAME STREET ADDRESS 6.3 STREET ADDRESS

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 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 trestee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if charged, or on an attachment with an address.

6.4 CITY - ST - ZIP