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

P97000058860 (2) DOCUMENT #

PORT CITY BACING OF PENSACOLA INC

FILED

Apr 29 1998 8:00am

Secretary of State

FOIII	III NACING OF PENCACO	LA, IIIO								
Principal Place	of Business	Mailing Address				,		#1 #1680 #681 # 1)	
8130 PENSACOLA BLVD.		8130 PENSACOLA BLVD.								
PENSACOLA FL \$2534		PENSACOLA FL 32534					DO NOT INDITE IN T	THE COACE		
							DO NOT WRITE IN T 3. Date incorporated or Qualified	INIS SPACE	 	
							07/07/1997			
2. Principal Pl	ace of Business	2a. Mailing Address					4. FEI Number Applied For			
21		26					59 3456689		Not Applicable	
Suite, Apt.	#, etc.	\vdash	Suite, Apt. #, etc.				5. Certificate of Status Desired Security Securi			
22		27 City 8 State						e Required		
City & State		City & State				6. Election Campaign Financing Trust Fund Contribution	\$5.	.00 May Be		
23		28	Zip Country							
Zip	Country	— ·	,		ntry		8. This corporation owes or has paid the			
24	25 S. Name and Address of Curren	29	d Agent	30]			Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent			
THE	OMPSON, LARRY	r neglatere	nu Agent		81 N	lame	10. Ivalile and Address of Ival Insgiste	BIOG AGOIL		
				l						
8130 Pe nsacola BLVD. Pens a cola Fl 32534			82			treet Addre	t Address (P.O. Box Number is Not Acceptable)			
PEN	ISACULA FL 32534		83							
					83					
				İ	84 C	ity		85	Zip Code	
		1.007	F00 F1 11 6 0 14					FL °°		
office or re	poistered agent, or both, in the State	of Florida	Such change was a	uthorized	i by the	amed corpo e corporati	oration submits this statement for the purpo on's board of directors. I hereby accept the	ose or chang: e appointmer	ng its registered	
agent. I ar	n familiar with, and accept the obliga	ations of, Sc	ection 607. ŏ505 , Flo	rida Stati	utes	•		* *		
SIGNATURE										
	Signature, typed or printed name of registered age OFFICERS AND			Registered	Agent si	gnature require	ed when reinstating) DA ADDITIONS/CHANGES TO OFFICERS	ATE NAND DIDEC	TODE IN 12	
12.	OFFICERS AND	TIMECTO	DELETE	1.1 10	1.5		ADDITIONS/CHAINGES TO OFFICERS	Cha		
TITLE	THOMPSON, LARRY		otter			-		O.W	, 100 CO	
NAME	8130 PENSACOLA BLVD.				1.2 NAME					
STREET ADDRESS	PENSACOLA FL 32534				1.3 STREET ADDRESS					
CITY-ST-ZIP	D D		DELETE 2.1 TI		Y-\$1-ZI	P		Cha	nge Addition	
TITLE	THOMPSON, TRAVIS		238					ال بي	ide 🗀 Vogition	
NAME	\$130 PENSACOLA BLVD.				-					
STREET ADDRESS	PENSACOLA FL 32534				2 3 STREET ADDRESS		:	1		
CITY-ST-ZIP	D PERIORODEA DE 02304		DELETE		1Y-S1-Z	IP		Cha	nge Addition	
TITLE	THOMPSON, DONNA		C) otreit	3.1 TIT				L Clia	ige L Addition	
NAME	8130 PENSACOLA BLVD.			3.2 NA						
STREET ADDRESS	PENSACOLA FL 32534				reet add					
CITY-ST-ZIP	PENSACOLA FL 32334		DELETE		14-81-2	IP .		Cha	nge Addition	
TITLE			☐ ALLEIE	4.1 TIT		1		Cha	ião 🗂 VOOITIQII	
NAME				4. 2 NA						
STREET ADDRESS					REET ADD	1				
CITY-ST-ZIP			DOUGTE	_	Y-S1-ZI	P		□ Cha	nge Addition	
TITLE			DELETE	5.1 TIT		1		☐ Cha	inge FTT Worldow	
NAME				5.2 NA						
STREET ADDRESS					REET ADD					
CITY-ST-ZIP			D Delete		Y-ST-ZI	P		1 0		
TITLE			DELETE	6 1 TH		ĺ		☐ Cha	nge 🔲 Addition	
NAME				62 NA		ĺ				
STREET ADDRESS				63 STI	REET ADD	ress				
CITY-ST-ZIP				64 CIT	Y - ST - ZI	P.				

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 or Chapter 607, Florida Statutes.