## 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 # P9700064343 (1)

MOVEUSA OF NW FLORIDA, INC.

Principal Place of Business

Mailing Address

## FILED Mar 16 1998 8:00am Secretary of State



8288 CALLS DE HIDALGO NAVARRE FL 32588		6268 CALLS DE HIDALGO NAVARRE FL 32566			
				DO NOT WRITE I	N THIS SPACE
	_			<ol> <li>Date Incorporated or Qualified</li> <li>07/24/1997</li> </ol>	
	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
	CALLE DE HIDALGO	26 6268 CALLE	DE HIDALGO	59-3459655	Not Applicable
Suite, Apt.	·	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Regulred
City & State	ARRE , FL	City & State  28 NAVARRE	FL	Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip F L	<b>32.566</b> Country 25	29 F L 32566 30	Country	This corporation owes or has paid Personal Property Tax due June 3	
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent					
CORPORATION SERVICE COMPANY 81 Na				ORETTA S. GAUTI	c ()
1201 HAYS STREET			82 Street Add	dress (P.O. Box Number is Not Acceptable	3)
TALLAHASSEE FL 32301-2525			2155	MUSKET DRIVE	,
			83		
			84 City		85 Zip Code
11 Pureuant	to the provisions of Sections 607 0502	and 607 1508. Florida Statutos 1	ho above pamed cor	NARRE reportation submits this statement for the pure	FL 32566
office or ri	edi <b>ste</b> red agent, or both, in the State of	l Florida. Such channa was auth	orizad by the cornors	ation's board of directors. I hereby accept	the appointment as registered
	m familiar with, and accept the obligation of the control of the c		AA 5 9	Manton.	3/5/98
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable (NOTE: Re	gistered Agent signature requ	uired when reinstating)	DATE
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICE	
TITLE	D OADE OTESENA	☐ DELETE		D	Change  Addition
NAME	CASE, STEVEN L			TEVEN L. CASE	_
STREET ADDRESS	6268 CALLS DE HIDALGO NAVARRE FL 32566		1.3 STREET ADDRESS 6	268 CALLE DE HIGHLE NAVARRE FL 32566	o
CITY-ST-ZIP	MAYARRE FL 32306	DELETE		NAVARLE, FL 32566	
TITLE		☐ VELETE	2.1 TITLE		☐ Change ☐ Addition ☐
NAME STOCET ADDRESS			2.2 NAME		i
STREET ADDRESS			2.3 STREET ADDRESS		
TITLE			2. 4 CITY - ST - ZIP 3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		·
CITY-ST-ZIP			3.4. CHY-ST-ZIP		
TITLE			4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY - ST - ZIP		
TITLE		☐ DELET <b>E</b>	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY - ST - ZIP		
TITLE			6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS	·:		6.3 STREET ADDRESS		
CITY-ST-ZIP	<u> </u>	ľ	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.