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

PROFIT CORPORATION ANNUAL REPORT 1999

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Mar 09, 1999 8:00 am Secretary of State 03-09-1999 90102 002 ***150.00

850)433-9337

HMRS, II	MENT # P970(n Name NC.											
Principal Place	e of Business	Mailin	g Address				7 (1000)600	tin idili ingli deili g	8111 8 (1)1 8 1	#!!!) !	1811 BIBI(1	HEIE WILLIED)
4455 N NINTH AVE PENSACOLA FL 32503 PENSACOLA FL 32503 PENSACOLA FL 32503						•	•	DO NOT WE	NTE IN T	HIS SDA	ACE.	
							3 Date Incorp	orated or Qualifec		1113 3 7		
							07/16/199		J			
2. Principal P	lace of Business	2a. Ma	ailing Address				4. FEI Number				Ap	plied For
1		26	3				59-34793	92			No	t Applicable
Suite, Apt.	#, etc.	Su	uite, Apt. #, etc.				5 Certificate of	Status Desired		-\$		Additional
2		27					J. Certificate of	Otatos Desired			Fee Re	guired
City & State	e	<u> </u>	ty & State				· ·	npaign Financing	, 🗀	,		May Be
3		28			intry		Trust Fund				Added I	o Fees
Zip	Country	Zip	P	_	ınıry		8. This corpora	ation owes the cu	rrent yea		ble Yes	□No
4	9. Name and Address of Co	29	ed Agent	30	т-			Address of New	Registe			
	3. Hallie and Address Of Or	direct Register	eu Agent		81	Name						
HAN	SON, CRAIG S					<u> </u>	(D.O. Bay Non	haria Nat Assan	toblo			
4455	N NINTH AVE				82	Street Addr	ess (P.O. Box Nun	iber is Not Accep	itable)			
PEN	SACOLA FL 32503				83			- -				_
					24	C:t.					5 Zip (Code
					84	City		•		FL °	al zib,	3006
11. Pursuant	to the provisions of Sections 607	7.0502 and 607.	1508, Florida Sta Such change was	tutes, the a	bove-r	named corporation	oration submits this	statement for the	a pumos	e of char	nging its ent as re	registered gistered
office or r agent. I a	registered agent, or both, in the S im familiar with, and accept the o	State of Florida. tobligations of, Se	Such change was ection 607.0505, I	authorized Florida Stat	d by th outes.	e corporatio	on's board of direct	s statement for thors. I hereby according	a pumos	ppointme	nging its ent as re	registered gistered
office or r agent. I a SIGNATURE	egistered agent, or both, in the S im familiar with, and accept the c	State of Florida. tobligations of, Se	Such change was ection 607.0505, I	authorized Florida Stat	d by th outes.	e corporatio	on's board of direct	s statement for thors. I hereby according	e purpose ept the ap	ppointme	ent as re	
office or r agent. I a SIGNATURE 12,	egistered agent, or both, in the S im familiar with, and accept the c	State of Florida, tobligations of, Se	Such change was ection 607.0505, I	authorized lorida Stat TE: Registered	d by th tutes.	e corporatio	on's board of direct	ors. I hereby acc	e purpose ept the ap	S AND D	ent as re	PRS IN 12
office or r agent. I a SIGNATURE 12.	registered agent, or both, in the S im familiar with, and accept the of Signature, typed or printed name of registers OFFICER	State of Florida, tobligations of, Se	Such change was action 607.0505, I plicable. (NO	authorized lorida Stat ote: Registered	d by th tutes.	e corporatio	on's board of direct	ors. I hereby acc	e purpose ept the ap	S AND D	IRECTO	PRS IN 12
office or r agent. I a SIGNATURE 12. FITLE	egistered agent, or both, in the Sm familiar with, and accept the discounties, typed or printed name of registers OFFICER D HANSON, CRAIG S 50 W BRAINERD ST	State of Florida, tobligations of, Se	Such change was action 607.0505, I plicable. (NO	authorized Florida Stati DTE: Registered 13.	d by th tutes.	e corporatio	on's board of direct	ors. I hereby acc	e purpose ept the ap	S AND D	IRECTO	PRS IN 12
office or r agent. I a SIGNATURE 12, TITLE NAME STREET ADDRESS	egistered agent, or both, in the Sim familiar with, and accept the dissipators, typed or printed name of registers OFFICER D HANSON, CRAIG S	State of Florida, tobligations of, Se	Such change was ection 607.0505, I	authorizec Florida Stat TE: Registered 13. 1.1 TF 1.2 N 1.3 ST 1.4 CI	d by th tutes. If Agent si TLE AME TREET AI	DDRESS	on's board of direct	ors. I hereby acc	e purpose ept the ap	S AND D	IRECTO	PRS IN 12
office or r	egistered agent, or both, in the Sm familiar with, and accept the discounties, typed or printed name of registers OFFICER D HANSON, CRAIG S 50 W BRAINERD ST	State of Florida, tobligations of, Se	Such change was action 607.0505, I plicable. (NO	authorizec Florida Stat TE: Registered 13. 1.1 TF 1.2 N/ 1.3 ST 1.4 CI 2.1 TF	AME TREET AI TTLE	DDRESS	on's board of direct	ors. I hereby acc	e purpose ept the ap	S AND D	IRECTO	ORS IN 12
office or r agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS	egistered agent, or both, in the Sm familiar with, and accept the discounties, typed or printed name of registers OFFICER D HANSON, CRAIG S 50 W BRAINERD ST	State of Florida, tobligations of, Se	Such change was ection 607.0505, I	TE: Registered 13. 1.1 Tr 1.2 No 1.3 ST 1.4 Cl 2.1 Tr 2.2 No 1.3 ST 2.2	TLE AME TREET AI TTLE AME TREET AI TTLE AME	e corporation ignature required DDRESS	on's board of direct	ors. I hereby acc	e purpose ept the ap	S AND D	IRECTO	PRS IN 12
office of ragent. I a gent. I a gent	egistered agent, or both, in the Sm familiar with, and accept the discounties, typed or printed name of registers OFFICER D HANSON, CRAIG S 50 W BRAINERD ST	State of Florida, tobligations of, Se	Such change was ection 607.0505, I	a authorized Florida Stat TE: Registered 13. 1.1 TT 1.2 NV 1.3 ST 1.4 CI 2.1 TT 2.2 NV 2.3 ST	Agent si TLE AME TREET AI TTLE AME TREET AI TTLE AME TREET AI	DDRESS DDRESS	on's board of direct	ors. I hereby acc	e purpose ept the ap	S AND D	IRECTO	PRS IN 12
office of ragent. I a gent. I a signature 12. IITLE IAME STREET ADDRESS DITY-ST-ZIP IITLE IAME STREET ADDRESS DITY-ST-ZIP ZITLE ZIT	egistered agent, or both, in the Sm familiar with, and accept the discounties, typed or printed name of registers OFFICER D HANSON, CRAIG S 50 W BRAINERD ST	State of Florida, tobligations of, Se	Such change was action 607.0505, I	13. 1.1 TT 1.2 N 1.3 ST 1.4 CI 2.2 N 2.3 ST 2.4 CO	Agent si TLE AME TREET AI TLE TREET AI TLE TREET AI TREET AI	DDRESS DDRESS	on's board of direct	ors. I hereby acc	e purpose ept the ap	S AND D	IRECTC Change	ORS IN 12 Addition
office of ragent. I a gent. I a SIGNATURE 12. ITLE IAME STREET ADDRESS SITY-ST-ZIP ITLE IAME STREET ADDRESS SITY-ST-ZIP ITLE	egistered agent, or both, in the Sm familiar with, and accept the discounties, typed or printed name of registers OFFICER D HANSON, CRAIG S 50 W BRAINERD ST	State of Florida, tobligations of, Se	Such change was ection 607.0505, I	13. 1.1 TT 1.2 NV 1.3 ST 1.4 CT 2.2 NV 2.3 ST 2.4 CC 3.1 TT	TAGET ALE TREET ALE	DDRESS DDRESS	on's board of direct	ors. I hereby acc	e purpose ept the ap	S AND D	IRECTO	ORS IN 12 Addition
office of ragent. I a gent. I a gent	egistered agent, or both, in the Sm familiar with, and accept the discounties, typed or printed name of registers OFFICER D HANSON, CRAIG S 50 W BRAINERD ST	State of Florida, tobligations of, Se	Such change was action 607.0505, I	13. 1.1 TT 1.2 N/ 1.3 ST 1.4 CC 2.1 TT 2.2 N/ 2.3 ST 2.4 CC 3.1 TT 3.2 N/	Agent since AME TREET AI TILE AME	DDRESS DDRESS	on's board of direct	ors. I hereby acc	e purpose ept the ap	S AND D	IRECTC Change	
office or ragent. I a SIGNATURE 12. ITLE IAME STREET ADDRESS STY: ST-ZIP ITLE IAME STREET ADDRESS STY: ST-ZIP ITLE IAME STREET ADDRESS	egistered agent, or both, in the Sm familiar with, and accept the discounties, typed or printed name of registers OFFICER D HANSON, CRAIG S 50 W BRAINERD ST	State of Florida, tobligations of, Se	Such change was action 607.0505, I	13. 1.1 TT 1.2 N/ 1.3 ST 1.4 CI 2.1 TT 2.2 N/ 2.3 ST 2.4 CC 3.1 TT 3.2 N/ 3.3 ST	Agent si TLE AME TREET AI TILE AME TREET AI TILE AME TREET AI TILE AME TREET AI	DDRESS DDRESS DDRESS	on's board of direct	ors. I hereby acc	e purpose ept the ap	S AND D	IRECTC Change	ORS IN 12 Addition
office of ragent. I a SIGNATURE 12. ITLE NAME STREET ADDRESS SITY-ST-ZIP ITLE NAME STREET ADDRESS SITY-ST-ZIP ITLE STREET ADDRESS SITY-ST-ZIP STREET ADDRESS SITY-ST-ZIP	egistered agent, or both, in the Sm familiar with, and accept the discounties, typed or printed name of registers OFFICER D HANSON, CRAIG S 50 W BRAINERD ST	State of Florida, tobligations of, Se	Such change was action 607.0505, I	13. 1.1 TT 1.2 N/ 1.3 ST 1.4 CI 2.1 TT 2.2 N/ 2.3 ST 2.4 CC 3.1 TT 3.2 N/ 3.3 ST	Agent si TLE AME TREET AI TILE AME TREET AI TILE AME TREET AI TILE AME TREET AI TILE AME TREET AI	DDRESS DDRESS DDRESS	on's board of direct	ors. I hereby acc	e purpose ept the ap	S AND D	IRECTC Change	PRS IN 12 Addition Addition
office of ragent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE VAME STREET ADDRESS CITY-ST-ZIP TITLE VAME STREET ADDRESS CITY-ST-ZIP TITLE	egistered agent, or both, in the Sm familiar with, and accept the discounties, typed or printed name of registers OFFICER D HANSON, CRAIG S 50 W BRAINERD ST	State of Florida, tobligations of, Se	Such change was action 607.0505, I	13. 1.1 TT 1.2 NV 1.3 ST 1.4 CC 2.1 TT 2.2 NV 2.3 ST 2.4 CC 3.1 TT 3.2 NV 3.3 ST 3.4 CC	TAGENT STATE AME TREET ALAME	DDRESS DDRESS DDRESS	on's board of direct	ors. I hereby acc	e purpose ept the ap	S AND D	IRECTO Change Change	PRS IN 12 Addition Addition
office of ragent. I a gent. I a gent	egistered agent, or both, in the Sm familiar with, and accept the discounties, typed or printed name of registers OFFICER D HANSON, CRAIG S 50 W BRAINERD ST	State of Florida, tobligations of, Se	Such change was action 607.0505, I	13. 1.1 TT 1.2 N/ 1.3 ST 1.4 CI 2.1 TT 2.2 N/ 2.3 ST 2.4 C 3.1 TT 3.2 N/ 3.3 ST 3.4 C 4.1 TT 4.2 N	TAGENT STATE AME TREET ALAME	DDRESS ZIP DORESS ZIP	on's board of direct	ors. I hereby acc	e purpose ept the ap	S AND D	IRECTO Change Change	PRS IN 12 Additio
office of ragent. I a agent. I a signature 12. ITLE IAME ITREET ADDRESS OITY-ST-ZIP ITLE IAME ITREET ADDRESS OITY-ST-ZIP ITLE IAME STREET ADDRESS	egistered agent, or both, in the Sm familiar with, and accept the discounties, typed or printed name of registers OFFICER D HANSON, CRAIG S 50 W BRAINERD ST	State of Florida, tobligations of, Se	Such change was action 607.0505, I	13. 1.1 TY 1.2 N/ 2.3 ST 2.4 CC 3.1 TT 3.2 N/ 3.3 ST 3.4 CC 4.1 TT 4.2 N/ 4.3 ST 4.4 S	I Agent si Ambe Treet Al Mity-St-Zitle Ambe Ambe Ambe	DDRESS ZIP DDRESS ZIP DDRESS DDRESS	on's board of direct	ors. I hereby acc	e purpose ept the ap	S AND D	IRECTO Change Change	PRS IN 12 Addition Addition
office of ragent. I a agent. I a signature 12. ITLE IAME ITREET ADDRESS OITY-ST-ZIP ITLE IAME STREET ADDRESS OITY-ST-ZIP	egistered agent, or both, in the Sm familiar with, and accept the discounties, typed or printed name of registers OFFICER D HANSON, CRAIG S 50 W BRAINERD ST	State of Florida, tobligations of, Se	Such change was action 607.0505, I	13. 1.1 TT 1.2 N/ 1.3 ST 1.4 CI 2.1 TT 2.2 N/ 2.3 ST 2.4 C 3.1 TT 3.2 N/ 3.3 ST 3.4 C 4.1 TT 4.2 N/ 4.3 ST 4.4 CI 5.1 TT	I Agent si Administrativa STATE AMBE TREET AL AMBE	DDRESS ZIP DDRESS ZIP DDRESS DDRESS	on's board of direct	ors. I hereby acc	e purpose ept the ap	S AND D	IRECTO Change Change	PRS IN 12 Addition Addition
office of ragent. I a agent. I a signature 12. ITLE IAME ITREET ADDRESS OITY-ST-ZIP ITLE IAME STREET ADDRESS OITY-ST-ZIP ITLE IAME STREET ADDRESS OITY-ST-ZIP ITLE IAME STREET ADDRESS OITY-ST-ZIP ITLE IAME ITLE ITLE IAME ITLE ITL	egistered agent, or both, in the Sm familiar with, and accept the discounties, typed or printed name of registers OFFICER D HANSON, CRAIG S 50 W BRAINERD ST	State of Florida, tobligations of, Se	Such change was action 607.0505, I	13. 1.1 TT 1.2 N/ 1.3 ST 1.4 CI 2.1 TT 2.2 N/ 2.3 ST 2.4 C 3.1 TT 3.2 N/ 3.3 ST 4.4 CI 5.1 TT 5.2 N/ 5.3 TT 5.2 N/ 5.3 TT 5.3 TT 5.3 N/ 5.3 TT	I Agent si Ambe Treet Al MITY-ST-ZITLE AMBE TREET AL ME TREET AL MAME	DDRESS ZIP DDRESS ZIP DDRESS	on's board of direct	ors. I hereby acc	e purpose ept the ap	S AND D	IRECTO Change Change	PRS IN 12 Addition Addition
office of ragent. I a agent. I a signature 12. IITLE IAME ITREET ADDRESS ITY-ST-ZIP ITILE IAME STREET ADDRESS ITY-ST-ZIP ITILE IAME STREET ADDRESS ITY-ST-ZIP ITILE IAME STREET ADDRESS ITY-ST-ZIP ITILE IAME	egistered agent, or both, in the Sm familiar with, and accept the discounties, typed or printed name of registers OFFICER D HANSON, CRAIG S 50 W BRAINERD ST	State of Florida, tobligations of, Se	Such change was action 607.0505, I	3 authorized Florida Stationida S	I Agent si	DDRESS ZIP DDRESS ZIP DDRESS ZIP DDRESS ZIP DDRESS	on's board of direct	ors. I hereby acc	e purpose ept the ap	S AND D	IRECTO Change Change	PRS IN 12 Additio
office of ragent. I a gent. I a gent	egistered agent, or both, in the Sm familiar with, and accept the discounties, typed or printed name of registers OFFICER D HANSON, CRAIG S 50 W BRAINERD ST	State of Florida, tobligations of, Se	Such change was action 607.0505, I	3 authorized Florida State Flo	I d by th uties. ITLE AME TITLE AME TITLE AME TITLE AME TITLE AME TITLE TITLE AME TITLE TITL	DDRESS ZIP DDRESS ZIP DDRESS ZIP DDRESS ZIP DDRESS	on's board of direct	ors. I hereby acc	e purpose ept the ap	S AND D	IRECTO Change Change Change	PRS IN 12 Addition Addition Addition
office of ragent. I a gent. I a gent	egistered agent, or both, in the Sm familiar with, and accept the discounties, typed or printed name of registers OFFICER D HANSON, CRAIG S 50 W BRAINERD ST	State of Florida, tobligations of, Se	Such change was action 607.0505, I	3 authorized Florida Stati 715: Registered 13. 1.1 TT 1.2 N/ 1.3 ST 1.4 CI 2.1 TT 2.2 N/ 2.3 ST 2.4 C 3.1 TT 3.2 N/ 3.3 ST 3.4 C 4.1 TT 4.2 N/ 4.3 ST 4.4 CI 5.1 TT 5.2 N/ 5.3 ST 5.4 CI 6.1 TT 5.2 N/ 5.3 ST 5.3 ST 5.4 CI 6.1 TT 5.2 N/ 5.3 ST 5.3 S	I d by th utles. ITLE AME TREET AI TITLE AME TREET AI TITLE AME TREET AI TITLE TREET AI TITLE TREET AI	DDRESS ZIP DDRESS ZIP DDRESS ZIP DDRESS ZIP DDRESS	on's board of direct	ors. I hereby acc	e purpose ept the ap	S AND D	IRECTO Change Change	PRS IN 12 Addition Addition Addition Addition
office of ragent. I a agent. I a agent. I a signature 12. TITLE VAME STREET ADDRESS CITY-ST-ZIP TITLE VAME	egistered agent, or both, in the Sm familiar with, and accept the discounties, typed or printed name of registers OFFICER D HANSON, CRAIG S 50 W BRAINERD ST	State of Florida, tobligations of, Se	Such change was action 607.0505, I	3 authorized Florida Stationida	d by the fulles.	DDRESS ZIP DDRESS ZIP DDRESS ZIP DDRESS ZIP DDRESS ZIP	on's board of direct	ors. I hereby acc	e purpose ept the ap	S AND D	IRECTO Change Change Change	PRS IN 12 Additio
office of ragent. I a gent. I a gent	egistered agent, or both, in the Sm familiar with, and accept the discounties, typed or printed name of registers OFFICER D HANSON, CRAIG S 50 W BRAINERD ST	State of Florida, tobligations of, Se	Such change was action 607.0505, I	3 authorized Florida Stationida	I d by th utles. ITLE AME TREET AI TITLE AME TREET AI TITLE AME TREET AI TITLE TREET AI TITLE TREET AI	DDRESS ZIP	on's board of direct	ors. I hereby acc	e purpose ept the ap	S AND D	IRECTO Change Change Change	PRS IN 12 Additio Additio