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 # P97000092889 (9)

JOHN H. POWELL INVESTMENTS, INC.

FILED

May 04 1998 8:00am

Secretary of State

Principal Place of Business Mailing Address					a included the inter canti antit butte conti destin in	IIM IIMAI INSAI	10116 1011 1001
534 MARINA POINT DR. P.O. BOX 2193							
DAYTONA BE	EACH FL 32114	DAYTONA BEACH FL 32115			DO NOT WRITE IN THIS	DO NOT WRITE IN THIS SPACE	
					3. Date Incorporated or Qualified		
Principal F	Place of Business	2a. Mailing Address			10/16/1997 4. FEI Number		Applied For
2. Principal F	tace of Business	26			59-3473497	⊢ →	Not Applicable
		Suite, Apl. #, etc.	Apl. #, etc.				5 Additional
22		27		5. Certificate of Status Desired	Fee Required		
City & State		City & State		6. Election Campaign Financing \$5.00 May Be			
23	Country	Z:p Country		Trust Fund Contribution			
Zip	<u>├</u> ──┐	Zip		У	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No		
24	25 g. Name and Address of Curren	29 Anent	30		10. Name and Address of New Registered	_	L) NO
			8	1 Name	ID. Marie and Maries of Hotel Togration	- regont	
POWELL, JOHN H 534 MARINA POINT DR. DAYTONA BEACH FL 32114							
			8:		Address (P.O. Box Number is Not Acceptable)		
			8:				
.4		•	84	1 City	Fl	85 Zi	ip Code
11. Pursuant	to the provisions of Sections 607,050 registered agent, or both, in the State	2 and 607.1508, Florida Statute of Florida, Such change was a	es, the abor authorized t	ve-named	corporation submits this statement for the purpose operation's board of directors. I hereby accept the ap	of changing	g its registered as registered
agent. I a	am familiar with, and accept the obliga	ntions of, Section 607.0505, Flo	orida Statute	es.	,		
SIGNATURE	Signature, typied or printed name of registered age	os and site il accocablo (NOTI	: Begistered A	nent signature	required when reinstating) DATE		
12.	OFFICERS AN		13.		ADDITIONS/CHANGES TO OFFICERS AN	D DIRECT	ORS IN 12
TITLE	P/v/s/t/d 534	DELETE	1.1 TITLE			Chang	
NAME	John H. Powell De	Marine PT. De.	1.2 NAME	}			
STREET ADDRESS	Post Office Box 219	37114	1.3 STREE	et address			1
CITY-ST-ZIP	Daytona Beach, FL32		1.4 CITY-	ST-7IP			
TITLE	d 534	Marina PT. DELETE	2.1 TITLE			Chang	e Addition
NAME	Gladys Powell Day	Tor4 Beh . 71 3214	2.2 NAME				
STREET ADDRESS	Post Office Box 219	3 '		1 ADDRESS			
CITY-ST-ZIP	Daytona Beach, FL 3	2115	2. 4 CITY	-ST-ZIP			
TITLE		DELETÉ	3.1 TITLE			Change	e 🔲 Addition
NAME			3.2 NAME				
STREET ADDRESS			3.3 STREE	ET ADDRESS			
CITY-ST-ZIP		···	34. CHY	-ST-ZIP			
TITLE		DELETE	4.1 TITLE			L Change	e [] Addilion
NAME)		4. 2 NAM	E Ì			
STREET ADDRESS			4.3 STREE	1 ADDRESS			
CITY-ST-ZIP			4.4 CITY-	ST-ZIP			
TITLE		☐ DELETE	5.1 TITLE	ļ		L Change	e L Addition
NAME			5.2 NAME				
STREET ADDRESS	1		5.3 STREE	T ADDRESS			
CITY-ST-ZIP			5.4 CITY	ST-ZIP			
· TITLE		☐ DELETE	6.1 TITLE			Changi	e [_] Addition
NAME			6.2 NAME				,
STREET ADDRESS			6.3 STREE	T ADDRESS			
CITY-ST-ZIP	contifue that the information supplied to	th this films down not swell 4.	6.4 CITY-		d in Section 119.07/2V/) Florida Statutos I furlhar o	andifus blance to	ha infana ation

4. I hereby certify that the information supplied with this thing does not quality for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplied entries and accurate and that hy 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 employered to execute this open as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 it clashed, or on an attachment with an address.

PONATURE & MILL STORY POWELL, President //2