

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

FILED
Jul 27, 1999 8:00 am
Secretary of State

07-27-1999 90012 021 *****8.75
07-27-1999 90012 022 ***550.00

**PROFIT
CORPORATION
ANNUAL REPORT
1999**



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P98000034381

1. Corporation Name

PCM PROPERTIES, INC

Principal Place of Business

221 E. GARDEN ST.
PENSACOLA FL 32501

Mailing Address

221 E. GARDEN ST.
PENSACOLA FL 32501

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/15/1998

4. FEI Number

59-3505174

Applied For

Not Applicable

5. Certificate of Status Desired ☒

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year
Intangible Personal Property. ☐ Yes ☒ No

2. Principal Place of Business

21 221 E. Garden Street

Suite, Apt. #, etc.

22 Suite 10W

City & State

23 Pensacola, Florida

Zip **24 32501**

Country **25 USA**

2a. Mailing Address

26 P.O. Box 30656

Suite, Apt. #, etc.

27

City & State

28 Pensacola, Florida

Zip **29 32503**

Country **30 USA**

9. Name and Address of Current Registered Agent

**MILLER, PHILIP C
221 E. GARDEN ST.
PENSACOLA FL 32501**

10. Name and Address of New Registered Agent

81 Name

Philip C. Miller

82 Street Address (P.O. Box Number is Not Acceptable)

631 Bayou Boulevard

83

84 City

Pensacola,

FL

85 Zip Code
32503

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 familiar with, and accept the obligations of, section 607.0505, Florida Statutes.

SIGNATURE **Philip C. Miller**

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

7/14/99
DATE

12. OFFICERS AND DIRECTORS

TITLE **President, Secretary, ☐ DELETE**
NAME **Philip C. Miller, Treas.**
STREET ADDRESS **221 E. Garden Street**
CITY-ST-ZIP **Pensacola, Florida 32501**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
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CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **President, Sec./Treas. ☒ Change ☒ Addition**
1.2 NAME **Philip c. Miller**
1.3 STREET ADDRESS **631 Bayou Boulevard**
1.4 CITY-ST-ZIP **Pensacola, Florida 32503**

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
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.

SIGNATURE:

SIGNATURE REQUIRED

7-14-99

850 432-8042

CR2E034 (5/99)