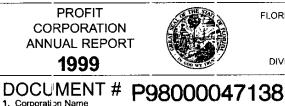
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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

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

04-27-1999 90193 019 ***150.00

| 1. Corporation Name | |
|---------------------|--|
| POW'R TOW, INC. | |
| | |

| Principal Place of Business Mailing Address | | | | [[EE])284 lid (des i filt matt) matty matty matty matty matty (matty) | | | | | |
|--|--|-------------------------------------|-------------------------|---|---------------------------------------|-----------------------|---------------|----------------------------|---------------|
| 3924 VICAR STREET P.O. BOX 15132 | | | | | | | | | |
| PANAMA CITY BEACH FL 32407 PANAMA CITY FL 32405-5132 | | ? | | | DO NOT WE | TE IN THE | SISPACE | | |
| | | | | DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified | | | | | |
| | | | | | 05/22/ | 1998 | <u>-</u> | | |
| 2. Principal 2 | ace of Business | 2a. Mailing Address | | | 4. FEI Nur | iber フェルコム | 5 | 1 1 | plied For |
| 21 | | 26 | | | 59- | 351025. | <u> </u> | | t /\pplicable |
| Suite, Apt. | #, etc. | Suite, Apt. #, etc. | | | 5. Certifca | e of Status Desired | | \$8.75 A Fee Red | |
| City & State | | City & State | | | & Election | Campaign Financing | | \$5.00 | May Bo |
| 23 | • | 28 | | | | nd Contribution | | Added to | • |
| Zip | Country | Zip . | Country | | | poration owes the cu | rrent vear Ir | r tangible. | |
| 24 | 25 | $\frac{1}{29}$ 32406 $\frac{1}{30}$ | ī i | | | I Property Tax. | , | | []No |
| | 9. Name and Address of Current | | | | 10. Name ε | nd Address of New | Registered | Agent | |
| | | | 81 | Name | | | | | |
| | GAN, VAN M | | 82 | Street Add | ress (P.O. Box | Number is Not Accep | table) | | |
| | VICAR STREET | | | | | | | | |
| PAIN | AMA CITY BEACH FL 32407 | | 83 | | | | | | |
| | | | 84 | City | | | | 85 Zip C | ode |
| | | | | <u> </u> | | | FI | | |
| office or re | to the provisions of Sections 607.0502 egistered agent, or both, in the State of in familiar with, and accept the obligation | Florida. Such change was auth- | orized by | the corporati | poration submits ion's board of di | rectors. I hereby acc | ept the appo | intment as reg | gistered |
| SIGNATURE | | | | | | | | | |
| | Signature, typed or printed nan e of registered agent a | | | t signature requi | ed when reinstating) | | DATE | UB BIBEOTO | |
| 12. | OFFICERS AND | | 13. | | ADDITIO | NS/CHANGES TO O | FFICERS A | Change | Addition |
| TITLE | D | ☐ DELETE | 1.1 TITLE | İ | | | | Onlinge | |
| NAME | MORGAN, VAN M | | 1.2 NAME | İ | | | | | |
| STREET ADDRESS | 3924 VICAR STREET | | 1.3 STREET | | | | | | |
| CITY-ST-ZIP | PANAMA CITY BEACH FL 32407 | | 1.4 CITY-S | T-ZIP | | | | Change | Addition |
| TITLE | D NODOAN IO ANN M | CT DECESE | 2.1 TITLE | | | | | onsings | |
| NAME | MORGAN, JO ANN M | | 2.2 NAME | | | | | | |
| STREET ADDRESS | 3924 VICAR STREET | | 2.3 STREET | | | | | | |
| CITY-ST-ZIP | PANAMA CITY BEACH FL 32407 | | 2.4 CITY-S 3.1 TITLE | 11-211 | | | | Change | Addition |
| TIFLE | | _ Section | 3.2 NAME | | | | | •· | _ |
| NAME STREET ADDRESS | | | 3.3 STREET | ADDRESS | | | | | |
| } | | | 34. CITY-S | | | | | | |
| CITY-ST-ZIP TITLE | | ☐ DELETE | 4,1 TITLE | 111211 | | | | Change | Addition |
| NAME | | _ | 4. 2 NAME | ł | | | | | |
| STREET ADDRESS | | | 4.3 STREET | ADDRESS | | | | | |
| CITY-ST-ZIP | | | 44 CTY-S | 1 | | | | | |
| TITLE | · · · · · · · · · · · · · · · · · · · | DELETE | 5.1 TITLE | | | | • | ☐ Change | Addition |
| NAME | | | 5.2 NAME | | | | | | |
| STREET ADDRESS | | | 53 STREET | ADDRESS | | | | | |
| CITY-ST-ZIP | | | 5.4 CITY-S | T-ZIP | | | | | |
| TITLE | | ☐ DELETE | 6.1 TITLE | <u> </u> | | | | ☐ Change | ☐ Addition |
| NAME | | | 6 2 NAME | - | | | | | |
| STREET ADDRESS | | | 6.3 STREET | ADDRESS | | | | | |
| CITY-ST-ZIP | | | 6.4 CITY-S | T-ZIP | | | | | |

CITY-ST-ZIP 14. Thereby 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, with all other like empowered.

SIGNATURE:

4-27-99 896-444.0

CR2E034 (11/98)