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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999 DOCUMENT # P98000049630

R.J.G. OF DESTIN, INC.

Principal Place of Business Mailing Address						F 100(100) IIO (0) 10 11 11 11 11 10 11 11 10 11 11 10 11 11	81918 19119 91189	11111 2211 1881
25 WALTER MARTIN RD. NE FT WALTON BEACH FL 32548		25 WALTER MARTIN RD. NE FT WALTON BEACH FL 32548			DO NOT WRITE IN THI	S SPACE		
						3. Date Incorporated or Qualifed		
-		1 20 14 17 - A data				06/01/1998 4. FEI Number		olied For
	ace of Business	2a. Mailing Address				59-3518960	———	Applicable
Suite, Apt.	tt etc	Suite, Apt. #, etc.					\$8.75 A	
22 Suite, Apt.	m, 616.	27				5. Certifcate of Status Desired	Fee Rec	
City & State		City & State			6. Election Campaign Financing	\$5.00	May Be	
23		28				Trust Fund Contribution	Added to	Fees
Zip	Country	Zip	Cou	ntry		8. This corporation owes the current year In		_
24	25	29	30			Personal Property Tax.		□No
	9. Name and Address of Current	t Registered Agent		81	Name	10. Name and Address of New Registered	Agent	
DETE	COMANN DICHARD D			01	Name			
PETERMANN, RICHARD P 25 WALTER MARTIN RD, NE				82	Street Addre	ess (P.O. Box Number is Not Acceptable)		
	ALTON BEACH FL 32548			83				
* * *	ACTON BEACHT E SECTO							
				84	City	FI	85 Zip C	ode
44 Dumunt	the provisions of Sections 607 0500	2 and 607 1508 Florida Statute	s the at	bove-	named corpo	pration submits this statement for the purpose of	f changing its	registered
office or re	egistered agent, or both, in the State on familiar with, and accept the obligat	of Florida. Such change was au	ıtnorized	DY U	he corporation	n's board of directors. I hereby accept the appo	intment as reg	istered
SIGNATURE		AIOYE	D:-t	A	signature required	when reinstating) DATE		[
12.	Signature, typed or printed name of registered agent OFFICERS ANI		13.	Ayerica	signatore required	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTOR	RS IN 12
TITLE	D	DELETE	1.1 TIT	ΠE			Change	Addition
NAME	PETERMANN, RICHARD P		1.2 NA	ME				
STREET ADDRESS	25 WALTER MARTIN RD, NE		1.3 ST	REETA	ADDRESS			
CITY-ST-ZIP	FT WALTON BEACH FL 32548		1.4 CI	TY-ST-	ZIP			
TITLE	D DELETE 2.1		2.1 TIT	TLE			Change	☐ Addition
NAME	GRIMSLEY, JAMES W		2.2 NA	WE				
STREET ADDRESS	25 WALTER MARTIN RD, NE		2.3 ST	REETA	ADORESS			
CITY-ST-ZIP	FT WALTON BEACH FL 32548			2. 4 CITY-ST-ZIP			Change	☐ Addition
TITLE	D	☐ DELETE	3,1 TII				. Change	C Addition
NAME	JONES, GEORGE W		3 2 NA					
STREET ADDRESS	801 SPANISH MOSS TRAIL				ADDRESS			
CITY-ST-ZIP	DESTIN FL 32541	□ DELETE	3.4. CI 4.1 TIT	ITY-ST-	- ZIP		☐ Change	Addition
TITLE	D DICH DUCC		4.2 N/				_ ,	_
NAME	ALDRICH, RUSS 12605 EMERALD COAST PKWY	/ CHITE 1			ADORESS			
STREET ADDRESS	DESTIN FL 32541	I, SUITE I		TY-ST-				
CITY-ST-ZIP TITLE	DESTIN FL 32341	☐ DELETE	5.1 TIT		<u> </u>		Change	Addition
NAME			5.2 NA					
STREET ADDRESS			5.3 ST	TREET A	ADDRESS			
CITY-ST-ZIP			5.4 CF	TY-\$T-	ZIP	_		
TITLE		☐ DELETE	6.1 TIT	πE			☐ Change	☐ Addition

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 exempt 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.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP

FILED

Feb 25, 1999 8:00 am Secretary of State

02-25-1999 90047 037 ***150.00

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