

**PROFIT
CORPORATION
ANNUAL REPORT
1999**



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

DOCUMENT # P98000087683

1. Corporation Name
PROVIDENCE PICTURES, INC.

Principal Place of Business
**747 JENKS AVENUE SUITE A
PANAMA CITY FL 32401**

Mailing Address
**POST OFFICE BOX 9146
PANAMA CITY BEACH FL 32417**

**APPROVED
AND
FILED**
1999 JUN 25 AM 10:44
**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

DO NOT WRITE IN THIS SPACE

3. Date for report to be qualified
10/12/1998
4. FEE Number ☒ Applied For ☐ Not Applicable
5. Certificate of Status: Domestic **\$8.75** Additional Fee Required
6. Election: Foreigning: Domestic **\$5.00** May Be Added to Fees
7. This corporation owes the current year for taxable Personal Property Tax ☐ Yes ☒ No
10. Name and Address of New Registered Agent

2. Principal Place of Business

2a. Mailing Address

21. State, Apt. # etc.	26. State, Apt. #, etc.
22. City & State	27. City & State
23. Zip	28. Zip
24. Country	29. Country
25. Country	30. Country

9. Name and Address of Current Registered Agent

**HESS, BRIAN D
9108 FRONT BEACH ROAD
PANAMA CITY BEACH FL 32407**

81. Name
82. Street Address (P.O. Box Number is Not Acceptable)
83. City
84. Zip Code
**700002925557--0
-07/07/99--01076--008
****150.00 ****150.00
FL 85 Zip Code**

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 this appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature of person for whom name is being changed and for whom agent is being appointed

Signature of Registered Agent

DATE

12. OFFICERS AND DIRECTORS

1. TITLE	D	☐ DELETE
2. NAME	DOWHEN, GARRICK	
3. STREET ADDRESS	747 JENKS AVENUE SUITE A	
4. CITY, ST, ZIP	PANAMA CITY FL 32401	
5. TITLE	D	☐ DELETE
6. NAME	DOWHEN, MARGARET	
7. STREET ADDRESS	747 JENKS AVENUE SUITE A	
8. CITY, ST, ZIP	PANAMA CITY FL 32401	
9. TITLE		☐ DELETE
10. NAME		
11. STREET ADDRESS		
12. CITY, ST, ZIP		
13. TITLE		☐ DELETE
14. NAME		
15. STREET ADDRESS		
16. CITY, ST, ZIP		
17. TITLE		☐ DELETE
18. NAME		
19. STREET ADDRESS		
20. CITY, ST, ZIP		

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	☐ Change ☐ Add
2. NAME	
3. STREET ADDRESS	
4. CITY, ST, ZIP	
5. TITLE	☐ Change ☐ Add
6. NAME	
7. STREET ADDRESS	
8. CITY, ST, ZIP	
9. TITLE	☐ Change ☐ Add
10. NAME	
11. STREET ADDRESS	
12. CITY, ST, ZIP	
13. TITLE	☐ Change ☐ Add
14. NAME	
15. STREET ADDRESS	
16. CITY, ST, ZIP	
17. TITLE	☐ Change ☐ Add
18. NAME	
19. STREET ADDRESS	
20. CITY, ST, ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 130.01, 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. 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:

[Signature]
PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/15/99

850-784-7379

GARRICK DOWHEN

Pg 2

6/23/99

Dear Mr. Dunlap,

Per our conversation this morning, enclosed herewith is a color copy of the form we sent to the state Division of Corporations on February 15th.

I am also enclosing a replacement check for \$150. As I explained over the telephone, the original check we sent in February has never cleared our bank. If it should eventually arrive at your office, apply it to next year or, if you prefer, just return it to our office mailing address.

Thank you for your help in this matter.

Sincerely,

Garrick Dowhen