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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

FILED Apr 16, 1999 8:00 am Secretary of State

04-16-1999 90087 047 ***150.00

DOCUMENT #	P98000094619
DOCCINICIAL #	P98000094619

1. Corporation Name

228 H.A., INC.

Principal Place of Busine
833 HARRISON AVE.
PANAMA CITY FL 32401

Mailing Address

833 HARRISON AVE. PANAMA CITY FL 32401



DO NOT WRITE IN THIS SPACE

					3.	Date Incorporated or Qualife	ed		
					Ì	11/05/1998			
2. Principal Pl	ace of Business	2a. Mailing Address			4.	FEI Number	•	j	pplied For
21		26		_			_		ot Applicable
Suite, Apt. :	#, etc.	Suite, Apt. #, etc.			5.	Certifcate of Status Desired		* • • • •	Additional equired
City & State	3 2000000000000000000000000000000000000	City & State	. سنجان	حرد شا موء	—. → la ·	Election Campaign Financin	g _□ .		May Be to Fees
Zip	Country	Zip	Countr	у	8.	This corporation owes the c	urrent year Int		
24	25	29 30	ol	_		Personal Property Tax.	_	Yes	□No
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent									
			8	1 Name					
	ANT, ROWLETT W		8:	2 Street A	Address (P.	O. Box Number is Not Acce	ptable)		
	HARRISON AVE.		L				_		
PANA	AMA CITY FL 32401		8:	3					
			8	\$ City			E1	85 Zip	Code
44-5	to the provisions of Sections 607.0502	2 4 607 1509 Florido Statutos	the abo	us-named c	ornoration	submits this statement for t	he nurnose of	= }	s registered
office of re	egistered agent, or both, in the State o	of Florida. Such change was auth	ionzed b	y the corpor	ration's bo	ard of directors. I hereby ac	ept the appoint	intment as r	egistered
agent. I ar	m familiar with, and accept the obligati	ions of, Section 607.0505, Florida	a Statute	S.			4		
SIGNATURE	Signature, typed or printed name of registered agent	t and title if applicable (NOTE: Re	enistered An	ent signature re	guired when re	einstating)	DATE		
12.	OFFICERS AND		13.			DDITIONS/CHANGES TO	FFICERS AI	ND DIRECT	ORS IN 12
TITLE	D	☐ DELETE	1.1 TITLE		Don B	Brown, Presiden		Change	Addition
NAME	BRYANT, ROWLETT W	!	1.2 NAME			Thomas Drive,			
STREET ADDRESS	833 HARRISON AVE.		1.3 STRE	ET ADDRESS				22408	
CITY-ST-ZIP	PANAMA CITY FL 32401		1.4 CITY-	ST-ZIP	Panan	na City Beach,	riorida	32400	
TITLE	TAINAINA OTT TE GETOT	☐ DELETE	2.1 TITLE	_				Change	Addition
NAME			2.2 NAME						
STREET ADDRESS			2.3 STRE	ET ADDRESS					
CITY-ST-ZIP] 2.		2. 4 CITY	-ST-ZIP					
TITLE	☐ DELETE 3.		3.1 TITLE	ITITLE				Change	Addition
NAME			3.2 NAME		,	ورمو ساري والمعاوية ما			تستحد تبندد تد
STREET ADDRESS			3.3 STRE	ET ADDRESS					
CITY-ST-ZIP			3.4. CITY	-ST-ZIP					
TITLE		☐ DELETE	4.1 TITLE	1				Change	☐ Addition
NAME			4. 2 NAM	E					
STREET ADDRESS			4.3 STRE	ET ADDRESS					
CITY-ST-ZIP			4.4 CfTY-	ST-ZIP					
TITLE	•	☐ DELETE	5.1 TITLE	I				Change	☐ Addition
NAME			5.2 NAME						•
STREET ADDRESS				ET ADDRESS					
CITY-ST-ZIP			5.4 CITY	1					Tarakita -
πιε		☐ DELETE	6.1 TITLE	h h				☐ Change	☐ Addition
NAME			6.2 NAME				•		
STREET ADDRESS			6.3 STRE	ET ADDRESS			•		
CITY-ST-ZIP	•		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 receives 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: