PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999 DOCUMENT # P98000098170

CENTURY 21 AKINS & ASSOCIATES, INC.

Principal Place	e of Business		Ma	iling Address					11881/83	i bin iniet sate antes	66111 68414 49 11	M (410) 18:07 44	11 1984 984 1981
2111 THOMAS DR. SUITE 6 2111 THOMAS DR. SUITE													
Panama City	BCH FL 32408		PAN	vama city bch fi	i, 32408	:08				DO NOT WE	RITE IN THI	S SPACE	
								}	3. Date Incorp	orated or Qualife	d		
									11/18/19				
2. Principal P	lace of Business		2a.	Mailing Address					4 CCI Number		<u> </u>	/	φρί ο d For
21			26						<u>59-3</u>	54899	76		lot Applicable
Suite, Apt.	#, etc.	<u> </u>	\Box	Suite, Apl. #, etc.				İ	5. Certificate of	Status Desired	2		Additional tequired
22			27	Cit. a Cinta									
City.& State	le		28	_City_&_State		·		1	5. Election Car Trust Fund	npaign Financing Contribution	₹. 📮)_May Be I to Fees
Zip		Country	281	Zip	Cc	untry	,			ition owes the cu	ment year l		
24	25	Country	29		30				Personal Pr		, , , , , , , , , , , , , , , , , , , ,	☐ Yes	□No
2-1		d Address of Current		tered Agent					10. Name and	Address of New	Registere	d Agent	
						81	Name						
	NS, REBA C					82	Street	Addres	s (P.O. Box Nurr	ber is Not Accep	otable)		
	THOMAS DR								•				
PAN	IAMA CITY BC	H FL 32408				83							
						84	City				FI	85 Zip	Code
						1 1						_ , ,	s registered
			1 00	7 4500 Finds 0	N				ntina autonita thia	etetement for th	A DOMESTIC OF	V Channing i	
11. Pursuant office or n	to the provisions	of Sections 507.0502 or both, in the State of	2 and 60 of Florid	07.1508, Fiorida S a. Such change w	latutes, the	above	-named the corp	corpore	ation submits this 's board of direct	statement for thors. I hereby acc	e purpose of ept the appo	of changing fi pintment as r	egistered
11. Pursuant office or n agent. I a	to the provisions registered agent, im familiar with,	of Sections 507.0502 or both, in the State o and accept the obligati	2 and 60 of Floridations of,	07.1508, Florida S a. Such change w Section 607.0505	Statutes, the vas authorize 5, Florida Sta	above ad by i	e-named the corp	corpora oration's	ation submits this 's board of direct	statement for thors, I hereby acc	e purpose of ept the appo	of changing fi pintment as r	egislered
11. Pursuant office or n agent. I a	registered agent, im familiar with, a	or both, in the State of and accept the obligati	ions of,	a. Such change w Section 607.0505	vas ausnunze 5, Florida Sta	itutes.	uie corp	ioraiuon :	a board or direct	statement for thors, I hereby acc	ept the appoint	of changing fi pintment as r	egislered
office of n agant. I a	registered agent, im familiar with, a	of Sections 607.0502 or both, in the State of and accept the obligations of registered agent OFFICERS AND	ions of,	a, Such change w Section 607.0505 (applicable.	Statutes, the vas authorize 5, Florida Sta (NOTE: Register	itutes.	uie corp	ioraiuon :	s board or direct	s statement for thors. I hereby according to the control of the co	DATE		ORS IN 12
office of n agent. I a SIGNATURE	registered agent, im familiar with, a Signature, typed or pi	or both, in the State of and accept the obligati inted name of registered agent OFFICERS ANI	on Florida ions of,	a, Such change w Section 607.0505 Implicable. (CTORS	(NOTE: Register	itutes.	uie corp	ioraiuon :	s board or direct	515. Holody Boo	DATE		ORS IN 12
office of n agent. I a SIGNATURE	Signature, typed or pu	or both, in the state of and accept the obligation of registered agent of the control of the co	i and title if	a, Such change w Section 607.0505 (applicable. (CTORS	(NOTE: Register	act by intuities.	uie corp	ioraiuon :	s board or direct	515. Holody Boo	DATE	ND DIRECT	ORS IN 12
office or n agent. I a SIGNATURE 12.	Signature, typed or pu	or both, in the state of and accept the obligation of registered agent of the control of the co	i and title if	a, Such change w Section 607.0505 (applicable. (CTORS	(NOTE: Register (NOTE: Register 13	ed Agent	uie corp	required w	s board or direct	515. Holody Boo	DATE	ND DIRECT	ORS IN 12
office of n agent. I a SIGNATURE 12. TITLE	Precide Reba 211176	or both, in the State of and accept the obligations again of the obligation of the o	and Illia II	a. Such criange w Section 607.0505 (applicable. CTORS	(NOTE: Register (NOTE: 1.1 1.2	ed Agent	tile corp i signature	required w	s board or direct	515. Holody Boo	DATE	UND DIRECT	ORS IN 12
office or n agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS	Signature, typed or pu	or both, in the State of and accept the obligations again of the obligation of the o	and Illia II	a, Such change w Section 607.0505 (applicable. (CTORS	(NOTE: Register (NOTE: 1.1 1.2	ed Agent i. TITLE NAME	tile corp i signature	required w	s board or direct	515. Holody Boo	DATE	ND DIRECT	ORS IN 12
office or n agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Precide Reba 211176	or both, in the State of and accept the obligations again of the obligation of the o	and Illia II	a. Such criange w Section 607.0505 (applicable. CTORS	(MOTE: Regulators 13 12 1.1 1.2 1.3 1.4	IN Agent TITLE NAME STREET CITY-ST	tile corp i signature	required w	s board or direct	515. Holody Boo	DATE	UND DIRECT	ORS IN 12
office or n agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZP TITLE	Signature typed or pi Freeible Reba 2111 Th	or both, in the State of and accept the obligations again of the obligation of the o	and Illia II	a. Such criange w Section 607.0505 (applicable. CTORS	MOTE: Regulation 13 TE 1.3 1.2 1.3 1.4 TE 2.1	IN AGENTALE INTLE INT	tile corp i signature	required wi	s board or direct	515. Holody Boo	DATE	UND DIRECT	ORS IN 12
office or n agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZP TITLE NAME	Signature typed or pi Freeible Reba 2111 Th	or both, in the State of and accept the obligations again of the obligation of the o	and Illia II	a. Such change w Section 607.0505 Inprincable. CTORS IN S DELET B 2 40 8 DELET	MOTE: Regular 13 IE 1.1 1.2 1.3 1.4 IE 21 2.2 2.3 2.4	IN TITLE NAME STREET CITY-SI TITLE NAME STREET CITY-SI CITY-S	T ADDRESS	required wi	s board or direct	515. Holody Boo	DATE	WD DIRECT ☐ Change ☐ Change	ORS IN 12 Addition
office or n agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZP TITLE NAME STREET ADDRESS	Signature typed or pi Freeible Reba 2111 Th	or both, in the State of and accept the obligations again of the obligation of the o	and Illia II	a. Such criange w Section 607.0505 (applicable. CTORS	13	IN AME STREET TITLE NAME STREET TITLE NAME STREET TITLE TITLE TITLE TITLE TITLE TITLE TITLE	T ADDRESS	required wi	s board or direct	515. Holody Boo	DATE	UND DIRECT	ORS IN 12
office or n agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature typed or pi Freeible Reba 2111 Th	or both, in the State of and accept the obligations again of the obligation of the o	and Illia II	a. Such change w Section 607.0505 Inprincable. CTORS IN S DELET B 2 40 8 DELET	(MOTE: Regular 13 12 13 14 15 12 22 23 2.4 1E 3.1 3.2 13.2 13.2 14 15 15 15 15 15 15 15 15 15 15 15 15 15	IN AME STREET CITY-ST TITLE NAME STREET CITY-ST TITLE NAME STREET CITY-S TITLE NAME	T ADDRESS T ADDRESS T ADDRESS	required wi	s board or direct	515. Holody Boo	DATE	WD DIRECT ☐ Change ☐ Change	ORS IN 12 Addition
office or n agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZEP TITLE NAME STREET ADDRESS CITY-ST-ZEP TITLE TITLE TITLE TITLE TITLE TITLE	Signature, typed or pi Freeible Reba 21/17h Panama	or both, in the State of and accept the obligations again of the obligation of the o	and Illia II	a. Such change w Section 607.0505 Inprincable. CTORS IN S DELET B 2 40 8 DELET	PAS AUTOMOTE: Regular 13 12 1.1 1.2 1.3 1.4 1.5 1.2 1.3 1.4 1.5 1.2 1.3 1.4 1.5 1.5 1.5 1.5 1.5 1.5 1.5 1.5 1.5 1.5	NAME STREET CITY-STREET CITY-STREET TITLE NAME STREET TITLE NAME STREET TITLE NAME STREET	IT ADDRESS T ADDRESS T ADDRESS T ADDRESS T ADDRESS	required wi	s board or direct	515. Holody Boo	DATE	WD DIRECT ☐ Change ☐ Change	ORS IN 12 Addition
Office or n agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZEP TITLE NAME STREET ADDRESS CITY-ST-ZEP TITLE NAME STREET ADDRESS CITY-ST-ZEP CITY-ST-ZEP CITY-ST-ZEP CITY-ST-ZEP CITY-ST-ZEP	Signature, typed or pi Freeible Reba 21/17h Panama	or both, in the State of and accept the obligations again of the obligation of the o	and Illia II	a. Such change w Section 607.0505 Applicable. CTORS DELET DELET	PAS EQUIDATES, Florida States (MOTE: Regular 13 13 14 12 13 14 15 14 15 15 15 15 15 15 15 15 15 15 15 15 15	ad Agent ad Age	IT ADDRESS T ADDRESS T ADDRESS T ADDRESS T ADDRESS	required wi	s board or direct	515. Holody Boo	DATE	Change	ORS IN 12 Addition Addition
Office or n agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZEP TITLE NAME STREET ADDRESS CITY-ST-ZEP TITLE NAME STREET ADDRESS CITY-ST-ZEP TITLE NAME STREET ADDRESS	Signature, typed or pi Freeible Reba 21/17h Panama	or both, in the State of and accept the obligations again of the obligation of the o	and Illia II	a. Such change w Section 607.0505 Inprincable. CTORS IN S DELET B 2 40 8 DELET	### A STE	NAME STREET CITY-STITLE NAME STREET CITY-STITLE NAME STREET TITLE	IT ADDRESS T ADDRESS T ADDRESS T ADDRESS T ADDRESS	required wi	s board or direct	515. Holody Boo	DATE	WD DIRECT ☐ Change ☐ Change	ORS IN 12 Addition Addition
Office or n agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZEP TITLE NAME STREET ADDRESS CITY-ST-ZEP TITLE NAME STREET ADDRESS CITY-ST-ZEP CITY-ST-ZEP CITY-ST-ZEP CITY-ST-ZEP CITY-ST-ZEP	Signature, typed or pi Freeible Reba 21/17h Panama	or both, in the State of and accept the obligations again of the obligation of the o	and Illia II	a. Such change w Section 607.0505 Applicable. CTORS DELET DELET	PAS AUTOMOTE: Regular 13 12 1.3 1.4 1E 2.1 2.2 2.3 2.4 1E 3.1 3.2 3.4 1E 4.1 4.2	and Agent TITLE NAME STREET CITY-S TITLE NAME STREET CITY-S TITLE NAME STREET CITY-S TITLE NAME NAME NAME NAME NAME NAME NAME	T ADDRESS T ADDRESS T ADDRESS T ADDRESS T ADDRESS T ADDRESS	required wi	s board or direct	515. Holody Boo	DATE	Change	ORS IN 12 Addition Addition
Office or n agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZEP TITLE NAME STREET ADDRESS CITY-ST-ZEP TITLE NAME STREET ADDRESS CITY-ST-ZEP TITLE NAME - STREET ADDRESS CITY-ST-ZEP TITLE	Precible Reba 2111 Th	or both, in the State of and accept the obligations again of the obligation of the o	and Illia II	a. Such change w Section 607.0505 Applicable. CTORS DELET DELET	PASS appropriate State (NOTE: Regular) 13 14 12 13 14 15 14 15 15 15 15 15 15 15 15 15 15 15 15 15	STREET CITY-SI TITLE NAME STREET CITY-SI TITLE NAME STREET CITY-SI TITLE NAME STREET TITLE NAME STREET NAME STREET NAME STREET NAME STREET NAME STREET TITLE NAME STREET STREET TITLE NAME STREET TITLE NAME STREET	T ADDRESS	required wi	s board or direct	515. Holody Boo	DATE	Change	ORS IN 12 Addition Addition
Office or in agent. I a signature 12. Title NAME STREET ADDRESS CITY-ST-ZEP	Precible Reba 2111 Th	or both, in the State of and accept the obligations again of the obligation of the o	and Illia II	# Section 607.0505 **Poplicable.** CTORS **1.5*** DELET DELET DELET	(MOTE: Requesers 13	ad Agent ITTLE NAME STREET CITY-SI TITLE NAME CITY-S TITLE NAME STREET CITY-S TITLE NAME CITY-S	T ADDRESS	required wi	s board or direct	515. Holody Boo	DATE	Change	ORS IN 12 Addition Addition Addition
Office or in agent. I a signature 12. Title NAME STREET ADDRESS CITY-ST-ZEP TITLE NAME	Precible Reba 2111 Th	or both, in the State of and accept the obligations again of the obligation of the o	and Illia II	a. Such change w Section 607.0505 Applicable. CTORS DELET DELET	(NOTE Requiser 13	and Agent and Ag	T ADDRESS	required wi	s board or direct	515. Holody Boo	DATE	Change	ORS IN 12 Addition Addition Addition
Office or in agent. I a signature 12. Title NAME STREET ADDRESS CITY-ST-ZEP TITLE NAME	Precible Reba 2111 Th	or both, in the State of and accept the obligations again of the obligation of the o	and Illia II	# Section 607.0505 **Poplicable.** CTORS **1.5*** DELET DELET DELET	(NOTE: Requiser 13 TE 1.3 1.2 1.3 1.4 TE 2.1 2.2 2.3 2.4 TE 3.1 4.1 TE 4.1 4.2 4.3 4.4 TE 5.1 5.2	and Agents ITTLE NAME STREET CITY-ST TITLE NAME STREET CITY-ST TITLE NAME STREET CITY-ST TITLE NAME	T ADDRESS T-ZIP T ADDRESS T-ZIP T ADDRESS T-ZIP T ADDRESS T-ZIP	required wi	s board or direct	515. Holody Boo	DATE	Change	ORS IN 12 Addition Addition Addition
Office or in agent. I a signature 12. Title NAME STREET ADDRESS CITY-ST-ZEP TITLE NAME STREET ADDRESS	Precible Reba 2111 Th	or both, in the State of and accept the obligations again of the obligation of the o	and Illia II	# Section 607.0505 **Poplicable.** CTORS **1.5*** DELET DELET DELET	(NOTE: Requiser 13 IE 1.3 1.2 1.3 1.4 IE 21 22 23 2.4 IE 31 3.4 IE 4.1 4.2 4.3 4.4 IE 5.1 5.2 5.3	and Agents ITTLE NAME STREET ITTLE	T ADDRESS T-ZIP T ADDRESS T-ZIP T ADDRESS T-ZIP T ADDRESS T-ZIP	required wi	s board or direct	515. Holody Boo	DATE	Change	ORS IN 12 Addition Addition Addition
Office or in agent. I a signature 12. ITILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	Precible Reba 2111 Th	or both, in the State of and accept the obligations again of the obligation of the o	and Illia II	Section 607.0505 Applicable. CTORS 12.5 DELET DELET	(NOTE: Requiser 13 TE 1.3 1.2 1.3 1.4 TE 2.1 2.2 2.3 2.4 TE 3.1 4.7 TE 4.1 4.2 4.3 4.4 TE 5.1 5.2 5.3	and Agent TITLE NAME STREET CITY-SI TITLE NAME STREET CITY-S TITLE NAME CITY-S TITLE	T ADDRESS T-ZIP T ADDRESS T-ZIP T ADDRESS T-ZIP T ADDRESS T-ZIP	required wi	s board or direct	515. Holody Boo	DATE	Change	ORS IN 12 Addition Addition Addition Addition
Office or in agent. I a signature 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Precible Reba 2111 Th	or both, in the State of and accept the obligations again of the obligation of the o	and Illia II	# Section 607.0505 **Poplicable.** CTORS **1.5*** DELET DELET DELET	(NOTE Requiser 13	AND	T ADDRESS T-ZIP T ADDRESS T-ZIP T ADDRESS T-ZIP T ADDRESS T-ZIP	required wi	s board or direct	515. Holody Boo	DATE	Change Change	ORS IN 12 Addition Addition Addition Addition
Office or in agent. I a signature 12. Title 12. Title 12. Title 13. STREET ADDRESS CITY-ST-ZIP 1TILE 14. MAME 5TREET ADDRESS CITY-ST-ZIP 1TILE 14. MAME 5TREET ADDRESS CITY-ST-ZIP 1TILE 14. MAME 5TREET ADDRESS CITY-ST-ZIP 1TILE 14. STREET ADDRESS CITY-ST-ZIP 1TILE 14.	Signature typed or pi Freeille Reba 2111 Th	or both, in the State of and accept the obligations again of the obligation of the o	and Illia II	Section 607.0505 Applicable. CTORS 12.5 DELET DELET	(NOTE Requiser 13	AND	T ADDRESS T-ZIP T ADDRESS T-ZIP T ADDRESS T-ZIP T ADDRESS T-ZIP	required wi	s board or direct	515. Holody Boo	DATE	Change Change	ORS IN 12 Addition Addition Addition 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 eath; 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.

~	-		ΔΤ		_
	11	м	Д.	11	•

FILED
May 10, 1999 8:00 am
Secretary of State
05-10-1999 90141 039 ***158.75