FILE NOW: FILING FEE AFTER MAY 1 IS $550.00

PROFIT CORPORATION ANNUAL REPORT

1997

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
97 JUL 28 AM 8:52

DOCUMENT # **S11065** **(7)**

1. Corporation Name
BOYNTON III, INC.

Principal Place of Business	Mailing Address
~~4400 BAYOU BLVD~~ / (CHANGE) ~~STE 44~~ / PENSACOLA FL 32503	PO BOX 7557 STE 44 PENSACOLA FL 32534-0557 US

3. Date Incorporated or Qualified: 11/02/1990
3a. Date of Last Report: 10/23/1996

2. Principal Place of Business
21 PRIVATE FINANCIAL INVESTMENT
Suite, Apt. #, etc.
22 CORP. C/O 101 SE 6th Ave.
City & State
23 Delray Beach, FL
Zip: 24 33483 Country: 25 U.S.A.

2a. Mailing Address
26
Suite, Apt. #, etc.
City & State
28
Zip: 29 Country: 30

4. FEI Number: 59-3111665 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired XX **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

COLD, KATHLEEN H
INDEPENDENT DRIVE, SUITE 2301
JACKSONVILLE FL 32202

10. Name and Address of New Registered Agent

81 Name D. DELMER C. Gowing III, P.A.
82 Street Address (P.O. Box Number is Not Acceptable) 101 S.E. 6th Avenue
83
84 City Delray Beach FL 85 Zip Code 33483

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

SIGNATURE _____ 7/24/97
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BOYNTON, THERESA B. ~~4400 BAYOU BLVD SUITE 44~~ / (CHANGE) PENSACOLA FL 32503	☐ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	D BOYNTON, THERESA B. N/A (c/o P. O. BOX 7557 PENSACOLA, FL. 32534-0557)	XX Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TA CATES, LAURE / (CHANGE) 2021 RICHARD JONES ROAD, SUITE 180 NASHVILLE TN 37215	☐ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	TA Gowing, Delmer C. III 101 SE 6th St. Delray Beach, FL 33483	XX Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	4.1 TITLE / 4. 2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP	$173.75 Bank	☐ Change ☐ Addition

CR2E034 (9/96)

14. I do 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 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.

SIGNATURE _____ July 28, 1997 904/474-2501