

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 MAY -1 AM 11:17

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **S94172** (1)

1. Corporation Name
WEB-MAR MANAGEMENT, INC.

DO NOT WRITE IN THIS SPACE.

Principal Place of Business
**6014 THOMAS DRIVE
PANAMA CITY BEACH FL 32407**

Mailing Address
**WEB-MAR MANAGEMENT, INC.
1819 MOYLAN RD.
PANAMA CITY BCH. FL 32407
US**

3. Date Incorporated or Qualified
11/15/1991

3a. Date of Last Report
04/11/1994

2. Principal Place of Business

2a. Mailing Address

4. FEI Number
59-3091529

Applied For
 Not Applicable

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

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

22 City & State

27 City & State

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

23 Zip

Country

28 Zip

Country

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

24

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9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**MELODEE WEBER
1819 MOYLAN RD.
PANAMA CITY BEACH FL 32407**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

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

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **P**
NAME **WEBER, JAMES J. JR.**
STREET ADDRESS **216 FAIRWAY BLVD**
CITY-ST-ZIP **PANAMA CITY BCH. FL**

1.1 TITLE Change Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE **VP**
NAME **WEBER, MELODEE**
STREET ADDRESS **216 FAIRWAY BLVD**
CITY-ST-ZIP **PANAMA CITY BCH. FL**

2.1 TITLE Change Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE **D**
NAME **MCKENNA, CHRIS**
STREET ADDRESS **9733 120TH ST NO.**
CITY-ST-ZIP **SEMINOLE FL**

3.1 TITLE Change Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE **D**
NAME **DEKORTZ, JANE**
STREET ADDRESS **13483 CORDOVA DRIVE**
CITY-ST-ZIP **LARGO FL**

4.1 TITLE Change Addition
4.2 NAME **Dekorte**
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE Change Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE Change Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: *Melodee Weber* *Melodee Weber* **4/27/95** **90423/18428**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(Date)

(Signature Number)