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FILED
Feb 22, 1999 8:00 am
Secretary of State

02-22-1999 90076 015 ***150.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



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

DOCUMENT # V19902

1. Corporation Name

SAM B. HEARN BROKER, INC.

Principal Place of Business
400 S ARNOLD DR
PANAMA CITY BEACH FL 32413
US

Mailing Address
400 S ARNOLD DR
PANAMA CITY BEACH FL 32413
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/05/1992

4. FEI Number

59-3112769

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.

☐

Yes

☒

No

2. Principal Place of Business

2a. Mailing Address

21 113 Colony Harbour Rd
Suite, Apt. #, etc.

26 113 Colony Harbour Rd
Suite, Apt. #, etc.

22 City & State
23 Panama City Beach, FL
Zip Country
24 32407 25 USA

27 City & State
28 Panama City Beach, FL
Zip Country
29 32407 30 USA

9. Name and Address of Current Registered Agent

RAYMOND EDWARD RHODES
400 S. ARNOLD ROAD
PANAMA CITY BEACH FL 32413

10. Name and Address of New Registered Agent

81 Name

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

113 Colony Harbour Rd.

83

84

City Panama City Beach FL

85

Zip Code

32407

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

Raymond Edward Rhodes RAYMOND EDWARD RHODES 1-14-99

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD
NAME RHODES, RAYMOND EDWARD
STREET ADDRESS 400 S. ARNOLD ROAD
CITY-ST-ZIP PANAMA CITY BEACH FL

☐ DELETE

TITLE DVST
NAME FRANCO, GRETCHEN G.
STREET ADDRESS 113 COLONY HARBOUR RD.
CITY-ST-ZIP PANAMA CITY BEACH FL

☐ DELETE

TITLE DV
NAME WYNDHAM, JOANNE
STREET ADDRESS 120 PEARL AVE
CITY-ST-ZIP PANAMA CITY BEACH FL 32413

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

PD
Rhodes, Raymond Edward
113 Colony Harbour Rd.
Panama City Beach, FL 32407

☒

Change

☐

Addition

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

☐

Change

☐

Addition

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

☐

Change

☐

Addition

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

☐

Change

☐

Addition

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

☐

Change

☐

Addition

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐

Change

☐

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 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, with all other like empowered.

SIGNATURE: Gretchen G. Franco 1-14-99 850-235-7986

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)