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FILED

Jan 15 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # 322780

(8)

1. Corporation Name

GREAT BAY DISTRIBUTORS, INC.

Principal Place of Business

2310 STARKEY RD.
LARGO FL 34641

33771
New Zip

Mailing Address

2310 STARKEY RD.
LARGO FL 33771-3852



3. Date Incorporated or Qualified
11/07/1967

3a. Date of Last Report
01/29/1996

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

4. FEI Number

59-1196133

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 has liability for intangible tax under s. 199.032,
Florida Statutes

☐

Yes

☐

No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

FOCARDI, CLAUDE C

2310 STARKEY RD.

LARGO FL 34641 // NEW ZIP 33771

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 reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME RUBRIGHT, CRAIG A.

STREET ADDRESS 1811 WEATHERSTONE

CITY - ST - ZIP SAFETY HARBOR FL

TITLE ☐ DELETE

NAME BELL, G RICHARD

STREET ADDRESS 14567 102ND AVENUE

CITY - ST - ZIP LARGO FL

TITLE ☐ DELETE

NAME KENNEDY, JAMES

STREET ADDRESS 2810 COUNTRYSIDE BLVD., UNIT 4

CITY - ST - ZIP CLEARWATER FL

TITLE ☐ DELETE

NAME SOKOLOWSKI, CLAUDIA

STREET ADDRESS 8341 144 LANE N

CITY - ST - ZIP SEMINOLE FL

TITLE ☐ DELETE

NAME PETRINI, RONALD R

STREET ADDRESS 12951 ESTATE TERRACE S

CITY - ST - ZIP LARGO FL

TITLE ☐ DELETE

NAME NELSON, DONALD

STREET ADDRESS 49 BISHOP CREEK DR

CITY - ST - ZIP SAFETY HARBOR FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME S

1.3 STREET ADDRESS FOCARDI, NINA

1.4 CITY - ST - ZIP 2310 STARKEY RD.

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME LARGO, FL 33771

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1/3/97 (813) 584-8626

CR2E034 (9/96)