

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Mar 03 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # G07724
 1. Corporation Name
SUN & SURF BEACH SHOP, INC.

Principal Place of Business 5418 Marina Drive Holmes Beach, FL 34217	Mailing Address 2033 Main St., Suite 600 Sarasota, FL 34237
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DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
11/8/82

2. Principal Place of Business 21	2a. Mailing Address 26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24	Country 25
	Zip 29
	Country 30

4. FEI Number 59-2231203	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent
**Linda L. Duytschaver
 5418 Marina Drive
 Holmes Beach, FL 34217**

10. Name and Address of New Registered Agent
 81 Name
Troy H. Myers, Jr.
 82 Street Address (P.O. Box Number is Not Acceptable)
2033 Main St., Suite 600
 83
 84 City
Sarasota, FL 85 Zip Code
FL 34237

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 *Troy H. Myers, Jr.* **Troy H. Myers, Jr.** **2/23/98**
Signature of officer or principal name of registered agent, and title if applicable. (NOT) Registered Agent signature required when re-stating. DATE

12. OFFICERS AND DIRECTORS

TITLE P/T/D	<input checked="" type="checkbox"/> DELETE
NAME Linda L. Duytschaver	
STREET ADDRESS 5418 Marina Drive	
CITY-ST-ZIP Holmes Beach, FL 34217	
TITLE VP	<input checked="" type="checkbox"/> DELETE
NAME Jon M. Duytschaver	
STREET ADDRESS 5418 Marina Drive	
CITY-ST-ZIP Holmes Beach, FL 34217	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE P/D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME Jon M. Duytschaver	
1.3 STREET ADDRESS 5418 Marina Drive	
1.4 CITY-ST-ZIP Holmes Beach, FL 34217	
2.1 TITLE VP/T/D/S	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME Amy J. Stickler	
2.3 STREET ADDRESS 5418 Marina Drive	
2.4 CITY-ST-ZIP Holmes Beach, FL 34217	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS 900002446429	
6.4 CITY-ST-ZIP -03/04/98-01011-021	
	***150.00

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.

SIGNATURE: *Jon M. Duytschaver* **Jon M. Duytschaver, P/D** **2/24/98** **(941)778-2169**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/97)