

FILE NOW: FILING FEE IS \$61.25

FILED

Mar 04 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 721506 (4)

1. Corporation Name

SANDY WAVES, INC.

Principal Place of Business

Mailing Address

3600 OCEAN BEACH BLVD
COCOA BEACH FL 32931
US3450 OCEAN BEACH BLVD
#706
COCOA BEACH FL 32931-4182
US3. Date Incorporated or Qualified
08/11/19713a. Date of Last Report
02/29/1996

4. FEI Number

59-2261279

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution☐ \$5.00 May Be
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

KELLAR, ROBERT S
3450 OCEAN BEACH BLVD
#706
COCOA BEACH FL 32931

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 617.0502 and 617.1508, 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 617.0503, 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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD ☐ DELETE
NAME KIRKPATRICK, TRUDEE
STREET ADDRESS 370 CAPRI ROAD
CITY - ST - ZIP COCOA BCH FL 321.1 TITLE VD ☐ Change ☒ Addition
1.2 NAME Smith, Maryann
1.3 STREET ADDRESS 104 W. Alachua Lane
1.4 CITY - ST - ZIP Cocoa Beach, Fl., 32931 ☐ Change ☐ AdditionTITLE STD ☐ DELETE
NAME KELLAR, ROBERT S
STREET ADDRESS 3450 OCEAN BEACH BLVD #706
CITY - ST - ZIP COCOA BEACH FL2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIPTITLE VD ☒ DELETE
NAME KABBOORD, DAVID W.
STREET ADDRESS 433 S BANANA RIVER BLVD
CITY - ST - ZIP COCOA BEACH FL3.1 TITLE D ☐ Change ☒ Addition
3.2 NAME Karen Worcester
3.3 STREET ADDRESS 355 Fairlane Drive
3.4 CITY - ST - ZIP Spartanburg, SC 29307 ☐ Change ☐ AdditionTITLE D ☒ DELETE
NAME SMITH, MARYANN
STREET ADDRESS 104 W. ALACHUA LANE
CITY - ST - ZIP COCOA BEACH FL4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIPTITLE VD ☒ DELETE
NAME KIRKPATRICK, TRUDEE
STREET ADDRESS 370 CAPRI ROAD
CITY - ST - ZIP COCOA BEACH FL 329315.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIPTITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP6.1 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: ROBERT S. KELLAR

2/26/97

407-783-4200

CR2E037 (9/96)