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

FILED
Jun 22 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT
1998

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

DOCUMENT # **186678** **(9)**

1. Corporation Name
TIDES COURT INC

Principal Place of Business	Mailing Address
~~0 WEST 9TH STREET~~ TULSA OK 74101 US	~~0 WEST 9TH STREET~~ P.O. BOX 1379. N/A TULSA OK 74101 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 P.O. Box 1379	2a. Mailing Address 26 P.O. Box 1379
Suite, Apt. # etc 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip / Country 24 / 25	Zip / Country 29 / 30

3. Date Incorporated or Qualified
07/20/1955

4. FEI Number
59-6081118
☐ Applied For
☐ Not Applicable

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

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

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
MOORE, TUCKER 173 BATH CLUB BLVD NO N. REDINGTON BEACH FL 33738	81 Name 82 Street Address (P.O. Box Number is Not Acceptable): 16400 Gulf Blvd, Suite 507 83 84 City: Redington Beach **FL** 85 Zip Code: 33708

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PST MOORE, C. T. 16700 GULF BLVD. N. REDINGTON BCH FL 33708	☐ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	☒ Change ☐ Addition	16400 Gulf Blvd, Suite 507 Redington Beach FL 33708
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD CARTWRIGHT, MARY K. 5309 E. PALOMINO RD PHOENIX AZ 85018	☐ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD MOORE, MELISSA A. 173 BATH CLUB BLVD NO N. REDINGTON BCH FL	☐ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP	☒ Change ☐ Addition	16400 Gulf Blvd, Suite 507 Redington Beach FL 33708
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V MOHR B.A.A., 99 TUDOR PL KENILWORTH IL	☐ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP	☒ Change ☐ Addition	16400 Gulf Blvd, Suite 507 Redington Beach, FL 33708
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP	☐ Change ☐ Addition	RECEIVED 6-22 -06/23/98-01004-028 ***150.00

CR2E034 (10/97)

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 added by an amendment with this report.

SIGNATURE _____ Title: _____