**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## **FILED** Mar 02, 1999 8:00 am **Secretary of State**

03-02-1999 90015 021 \*\*\*150.00

## **DOCUMENT # 372446**

. Corporation	Thanks	_										
ST. ANDREW BAY REAL ESTATE, INC.											II BIBIL (86)	
							1					
					_		_					
Principal Place of Business Mailing Address							ļ					
111 W 23 ST 111 W 23 ST							-					
PANAMA CITY FL 32405-4504 PANAMA CITY FL 32405-4504								DO NOT WRITE IN THIS SPACE				
							3.	Date Incorporated or Qualifed				
								11/09/1970	-			
2. Principal Pl	ace of Business	2a	. Mailing Address		•		4.	FEI Number		Appl	ied For	
21		26	J					59-1362034		Not .	Applicable	
Suite, Apt.	#, etc.	1	Suite, Apt. #, etc.					<u>_</u>	\$8.7	<b>75</b> Ad	ditional	
22		27					) s.	Certificate of Status Desired	Fe	e Req	uired	
City & State	9	<del>  '</del>	City & State				6.	Election Campaign Financing	<b>\$</b> 5.	<b>00</b> M	lay Be	
23		28						Trust Fund Contribution	Ado	ted to	Fees	
Zip	Country		Zip	Country	у		8.	This corporation owes the current year In	langible			
24	25	29	3	30				Personal Property Tax.	Yes		]No	
•	9. Name and Address of Current	Regis	stered Agent				10.	Name and Address of New Registered	Agent			
				81	1	Name						
TIMMINS,STANLEY					2	Street Ad	dress (P	P.O. Box Number is Not Acceptable)				
4626 BAYWOOD DR.					1	Ottoberia	1) 2001					
LYNN HAVEN FL 32444					3							
					_				05	Zip Co		
				84	4	City		· FL	85	zip Ci	lue	
11. Pursuant	to the provisions of Sections 607.0502	and 6	607.1508, Florida Statutes	s, the abov	ve-	-named co	rporation	n submits this statement for the purpose of	changin	g its re	egistered	
office or re	egistered agent, or both, in the State on familiar with, and accept the obligati	f Flori	da. Such change was aut	thorized by	v ti	he corpora	ition's bo	pard of directors. I hereby accept the appo	intment a	ıs regi	stered	
	n Jamiliai witii, and accept the congati	0115 01	, Section 607.0300, 1 tone	aa Statute.	Э.						{	
SIGNATURE	Signature, typed or printed name of registered agent	and title	if applicable. (NOTE: F	Registered Age	ent	signature requ	ired when r	reinstating) DATE			-	
12.	OFFICERS AND	···		13.				ADDITIONS/CHANGES TO OFFICERS A	ND DIRE	CTOR	S IN 12	
TITLE	PD		☐ DELETE	1.1 TITLE					☐ Cha	nge	☐ Addition	
NAME	TIMMINS, STANLEY			1.2 NAME							İ	
STREET ADDRESS	4626 BAYWOOD DR.			1.3 STREE	ET /	ADDRESS					j	
CITY-ST-ZIP	LYNN HAVEN FL			1.4 CITY-5	ST-	-ZIP						
TITLE	TS		☐ DELETE	2.1 TITLE					Cha	nge	☐ Addition	
NAME	RHODES, ROGER T.			2.2 NAME		}			٠		-	
STREET ADDRESS	106 CHELSEA LANE			2.3 STREE	ET.	ADORESS						
CITY-ST-ZIP	LYNN HAVEN FL 32444			2. 4 CITY-		1						
TITLE	V		☐ DELETE	3.1 TITLE		-		<del></del>	☐ Cha	nge	☐ Addition	
NAME	MCCOY,ELKE		_	3 2 NAME							ļ	
STREET ADDRESS	100 CHERRY ST APT 801			3.3 STREE		ADDRESS					1	
CITY-ST-ZIP	PANAMA CITY FL			3.4. CITY-							ŀ	
TITLE	D.		☐ DELETE	4.1 TITLE		-2.11	D		Cha	nge	☐ Addition	
NAME	COUNTS, STEVEN G			4. 2 NAME			Con	nts, Steven G.	-	-	}	
STREET ADDRESS	4211 MARINER DRIVE			4.3 STREE		ADDRESS		9 Mariner Drive				
	PANAMA CITY BCH FL 32408			4.4 CITY-					3,2,4,0	Ω		
CITY-ST-ZIP TITLE	D PANAMA CITT DON FL 32400		☐ DELETE	5.1 TITLE		-217	rall	ama CICY Den FL .	Cha		Addition	
				5.2 NAME						•		
NAME STREET ADDRESS	JONES, RON			1		ADORESS						
STREET ADDRESS	6213-B PINETREE AVE			5.4 CITY-	-							
CITY-ST-ZIP	PANAMA CITY BCH FL 32408			0.7 OH 15	-1							

PANAMA CITY BEACH FL 32408 CITY-ST-ZIP 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.

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

HODGES, KEITH

1306 POMPANO DRIVE

TITLE

NAME

STREET ADDRESS

☐ DELETE

850-769-1484

Addition

Change