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Secretary of State

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PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 372446

1. Corporation Name

ST. ANDREW BAY REAL ESTATE, INC.

Principal Place of Business

111 W 23 ST
PANAMA CITY FL 32405-4504

Mailing Address

111 W 23 ST
PANAMA CITY FL 32405-4504

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/09/1970

4. FEI Number

59-1362034

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

23 City & State

27 City & State

24 Zip

25 Country

29 Zip

30 Country

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 the current year Intangible

Personal Property Tax. Yes No

9. Name and Address of Current Registered Agent

TIMMINS, STANLEY
4626 BAYWOOD DR.
LYNN HAVEN FL 32444

10. Name and Address of New Registered Agent

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

OFFICERS AND DIRECTORS

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD DELETE

NAME TIMMINS, STANLEY
STREET ADDRESS 4626 BAYWOOD DR.
CITY-ST-ZIP LYNN HAVEN FL

1.1 TITLE Change Addition

TITLE TS DELETE

NAME RHODES, ROGER T.
STREET ADDRESS 106 CHELSEA LANE
CITY-ST-ZIP LYNN HAVEN FL 32444

2.1 TITLE Change Addition

TITLE V DELETE

NAME MCCOY, ELKE
STREET ADDRESS 100 CHERRY ST APT 801
CITY-ST-ZIP PANAMA CITY FL

3.1 TITLE Change Addition

TITLE D DELETE

NAME COUNTS, STEVEN G
STREET ADDRESS 4211 MARINER DRIVE
CITY-ST-ZIP PANAMA CITY BCH FL 32408

4.1 TITLE Change Addition

4.2 NAME Counts, Steven G.
4.3 STREET ADDRESS 3729 Mariner Drive
4.4 CITY-ST-ZIP Panama City Bch FL 32408

TITLE D DELETE

NAME JONES, RON
STREET ADDRESS 6213-B PINETREE AVE
CITY-ST-ZIP PANAMA CITY BCH FL 32408

5.1 TITLE Change Addition

TITLE D DELETE

NAME HODGES, KEITH
STREET ADDRESS 1306 POMPANO DRIVE
CITY-ST-ZIP PANAMA CITY BEACH FL 32408

6.1 TITLE Change Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 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.

SIGNATURE:

Stanley Timmins
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-20-99 850-769-1484
Date Daytime Phone #

CR2E034 (1/98)