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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # 696870

(5)

SUGAR PLUM OF AMELIA ISLAND, INC.

Principal Place of Business Mailing Address VILLAGE SHOPS. VILLA #2 VILLAGE SHOPS. VILLA #2 AMELIA ISLAND FL 32034 AMELIA ISLAND FL 32034 3. Date Incorporated or Qualified 3a. Date of Last Report 07/30/1981 03/08/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-2109267 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Country Country 8. This corporation has liability for intangible tax under s. 199.032, Yes No 24 29 30 Florida Statutes 25 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name JACOBS, ARTHUR I. 904 ATLANTIC AVENUE, P.O. DRAWER I 82 Street Address (P.O. Box Number is Not Acceptable) FERNANDINA BEACH FL 32034 83 В4 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. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, type:if or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE PTO 1.1 TITLE Change Addition TETLE KOLAR, JANET NAME 1.2 NAME

36 SEA MARSH STREET ADDRESS 1.3 STREET ADDRESS AMILIA ISLAND, FL 32034 CHY-ST-ZIP 1.4 CITY-\$T-ZIP DELETE Change ___ Addition THILE 21 TITLE KOLAR, RON NAME 2.2 NAME 36 SEA MARSH 2.3 STREET ADDRESS STREET ADDRESS AMELIA ISLAND, FL 32034 2. 4 CITY - ST - ZIP CHY-ST-ZIP DELETE Change Addition THE 3.1 TITLE FITZGERALD, JANE NAME 3.2 NAME 325 BRENTWOOD DRIVE 3.3 STREET ADDRESS STREET ADDRESS TEMPLE TERRACE, FL 33617 CHY-ST-ZIP 3.4. CITY-ST-ZIP DELETE 4.1 TITLE Change Addition TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - ZIP CHY-ST-ZIP □ DELETE Change ___ Addition 5.1 TITLE THILE 5.2 NAME NAME **5.3 STREET ADDRESS** STREET ADDRESS 5.4 CITY-ST-ZIP CITY - ST-ZIP DELETE Change Addition 6.1 TITLE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY - ST - ZIP 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address

SIGNATURE

et H. Kolar 4-1-97 90+ 2612671

FILED

Apr 08 1997 8:00am

Secretary of State