

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # F26891 (4)

1. Corporation Name

BLUEWATER BAY SERVICES, INC.



Principal Place of Business

4400 HWY. 20 EAST
SUITE 304
NICEVILLE FL 32588-0906

Mailing Address

P.O. BOX 5220
NICEVILLE FL 32578
US

3. Date Incorporated or Qualified
03/25/1981

3a. Date of Last Report
05/01/1995

2. Principal Place of Business
21 4540 Highway 20 East

2a. Mailing Address

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Niceville, FL

28 Zip

24 32578

25 Country
Okaloosa

29 Zip

30 Country

4. FEI Number
58-1471740

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 has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

WEAVER, DAVID C
4400 HWY. 20 EAST
SUITE 304
NICEVILLE FL 32588-0906

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)
4540 Highway 20, East

83

84 City
Niceville

85 Zip Code
FL 32578

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

Jerome A. Zivan

Jerome A. Zivan, President

April 23, 1996

Signature typed or printed name of registered agent and title, if applicable.

(NOTE: Registered Agent signature required when not stating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD ☐ DELETE
NAME ZIVAN, JEROME A
STREET ADDRESS 4400 HWY. 20 EAST, #304
CITY - ST - ZIP NICEVILLE FL 32578

1.1 TITLE ☒ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS 4540 Highway 20 East
1.4 CITY - ST - ZIP Niceville, FL 32578

TITLE VS ☐ DELETE
NAME WEAVER, DAVID C
STREET ADDRESS 4400 HWY. 20 EAST, #304
CITY - ST - ZIP NICEVILLE FL 32578

2.1 TITLE ☒ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS 4540 Highway 20, East
2.4 CITY - ST - ZIP Niceville, FL 32578

TITLE ST ☒ DELETE
NAME MARTIN, ELLEN W.
STREET ADDRESS 4400 HWY. 20 EAST, #304
CITY - ST - ZIP NICEVILLE FL

3.1 TITLE ☐ Change ☒ Addition
3.2 NAME ST
3.3 STREET ADDRESS Andrea Haddix
3.4 CITY - ST - ZIP 4540 Highway 20, East
Niceville, FL 32578

TITLE V ☐ DELETE
NAME HARRIS, HELENE R.
STREET ADDRESS 4400 HIGHWAY 20 EAST, STE 304
CITY - ST - ZIP NICEVILLE FL

4.1 TITLE ☒ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS 4540 Highway 20, East
4.4 CITY - ST - ZIP Niceville, FL 32578

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

6.1 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 is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 attached sheet with an address.

SIGNATURE:

Jerome A. Zivan

Jerome A. Zivan, President 4/23/96 (904) 897-6430

Signature and typed or printed name of signing officer or director

Date

Daytime Phone #

CR2E034 (12/95)