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CORPORATION
ANNUAL REPORT
1995



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

FILED

95 JAN 25 PM 3:02

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F52011

(6)

1. Corporation Name

STATESIDE INVESTMENTS, INC.

Principal Place of Business

4417 BEACH BLVD.
200
JACKSONVILLE FL 32207
US

Mailing Address

4417 BEACH BLVD.
200
JACKSONVILLE FL 32207
US

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

11/02/1981

3a. Date of Last Report

03/30/1994

4. FEI Number

59-2147336

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

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

PHILLIPS, PHILIP B JR
3728 PHILLIPS HWY 39
JACKSONVILLE FL 32207

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 that it applies.

(NOTE: Registered Agent signature required when resigning)

DATE

12. OFFICERS AND DIRECTORS

TITLE D
NAME VON DONNERSMARCK, CARL
STREET ADDRESS BOGELSANGSTRASSE 390
CITY-ST-ZIP AAGRAU, SWITZERLAND00000

TITLE D
NAME VON DONNERSMARCK, COUNT
STREET ADDRESS CLARIDENSTRASSE 22
CITY-ST-ZIP ZURICH SW

TITLE S
NAME RICKS, ALEX J
STREET ADDRESS 1660 PRUDENTIAL DR #203
CITY-ST-ZIP JACKSONVILLE, FL 00000

TITLE PTD
NAME PHILLIPS, PHILIP B JR
STREET ADDRESS 3728 PHILLIPS HWY 39
CITY-ST-ZIP JACKSONVILLE, FL 00000

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☒ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☒ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

255 N. Liberty Street
Jacksonville, FL 32207

Jacksonville, FL 32207

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 110.07(3)(b), Florida Statutes. I further certify that the information included 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 sole or trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13, as required, or on an attached list with the address.

SIGNATURE:

Philip B. Phillips, Jr.

1/17/95 (907) 346-9960

Date

Telephone #