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FILED
May 12 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # F94000005705 (8)

1. Corporation Name
SUN CATCHER, INC.



Principal Place of Business

619 FRONT STREET
SLIP #1
KEY WEST FL 33040
US

Mailing Address

619 FRONT STREET
SLIP #1
KEY WEST FL 33040
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/03/1994

4. FEI Number

64-0839565

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

21 A+B Marina
Suite, Apt. #, etc.

22 700 Front St Slip 50
City & State

23 Key West, FL
Zip

24 33040 Country
25 US

2a. Mailing Address

26 A+B Marina
Suite, Apt. #, etc.

27 700 Front St Slip 50
City & State

28 Key West, FL
Zip

29 33040 Country
30 US

9. Name and Address of Current Registered Agent

BAMFIELD, RONALD R.
619 FRONT STREET
SLIP #1
KEY WEST FL 33040

10. Name and Address of New Registered Agent

81 Name Joseph V Argiro
82 Street Address (P.O. Box Number is Not Acceptable)
700 Front Street Slip 50
83 A+B Marina
84 City Key West FL 85 Zip Code 33040

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

12. OFFICERS AND DIRECTORS

TITLE CP
NAME CROSBY, PATRICIA P
STREET ADDRESS 137 BAYOU RD
CITY-ST-ZIP GREENVILLE MS 38701

TITLE S
NAME STATEN, WILLIAM A.
STREET ADDRESS 1417 TRAILWOOD DRIVE, SUITE A
CITY-ST-ZIP GREENVILLE MS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

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

6.1 TITLE
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.

SIGNATURE

6/24/98 (601) 335-7411

CR2E034 (10/97)