

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 # F95000006071 (3)

1. Corporation Name

SEASIDE INVESTMENTS, INC. OF DELAWARE



Principal Place of Business

3455 COASTAL HWY  
ST AUGUSTINE FL 32095

Mailing Address

3455 COASTAL HWY  
ST AUGUSTINE FL 32095

3. Date Incorporated or Qualified  
12/13/1995

3a. Date of Last Report  
new

2. Principal Place of Business

21 3455 Coastal Hwy.

Suite, Apt. #, etc.

22

City & State

23 St. Augustine FL

Zip

24 32095

Country

25 USA

2a. Mailing Address

26 P.O. Box 3047

Suite, Apt. #, etc.

27

City & State

28 St. Augustine FL

Zip

29 32095-3047

Country

30 USA

4. FEI Number  
APPLIED FOR 59-3341479

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

WOLFE, LARRY  
200-A JOHN KNOX ROAD  
TALLAHASSEE FL 32303-6643

10. Name and Address of New Registered Agent

81 Name Carol L. Joyner

82 Street Address (P.O. Box Number is Not Acceptable)  
1370 Riviera Street

83

84 City St Augustine

FL

85 Zip Code  
32084

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 Carol L. Joyner Carol L. Joyner - Sec/Treasurer

4-29-96

12. OFFICERS AND DIRECTORS

TITLE DCPV ☐ DELETE  
NAME JOYNER, ROBERT L  
STREET ADDRESS 3455 COASTAL HWY  
CITY-ST-ZIP ST AUGUSTINE FL 32095

TITLE ST ☐ DELETE  
NAME JOYNER, CAROL L  
STREET ADDRESS 3455 COASTAL HWY  
CITY-ST-ZIP ST AUGUSTINE FL 32095

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
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

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 attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Robert L. Joyner 4-29-96 904-824-9157  
President

CR2E034 (12/95)