

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED
Mar 13 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # G52663

(3)

1. Corporation Name

MITCHELL'S SAND CASTLES, INC.



Principal Place of Business

3951 GULF DR.
SANIBEL FL 33957

Mailing Address

3951 GULF DR.
SANIBEL FL 33957-5296

3. Date Incorporated or Qualified
08/03/1983

3a. Date of Last Report
03/19/1996

2. Principal Place of Business

21 State, Apt. #, etc.

22 City & State

23 Zip Country

24

2a. Mailing Address

26 State, Apt. #, etc.

27 City & State

28 Zip Country

29

4. FEI Number
59-2309293

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

MITCHELL, BARBARA ANN
3951 GULF DRIVE
SANIBEL FL 33957

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 of Registered Agent or Officer/Director)

(NOTE: Registered Agent's signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	SD	☐ DELETE
NAME	PALMER, ROXANNE	
STREET ADDRESS	3951 GULF DRIVE	
CITY - ST - ZIP	SANIBEL FL	
TITLE	PD	☐ DELETE
NAME	MITCHELL, BARBARA ANN	
STREET ADDRESS	3951 GULF DRIVE	
CITY - ST - ZIP	SANIBEL FL	
TITLE	D	☐ DELETE
NAME	PALMER, RALPH	
STREET ADDRESS	3951 GULF DRIVE	
CITY - ST - ZIP	SANIBEL FL	
TITLE	D	☐ DELETE
NAME	MILLER, CAROLYN	
STREET ADDRESS	3951 GULF DRIVE	
CITY - ST - ZIP	SANIBEL FL	
TITLE	D	☐ DELETE
NAME	MILLER, BRUCE	
STREET ADDRESS	3951 GULF DRIVE	
CITY - ST - ZIP	SANIBEL FL	

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 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 or changed, or on an attachment with an address

SIGNATURE:

Barbara Mitchell

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-6-97

941-4721282

Date

Daytime Phone

0404030

CR2E034 (9/96)