


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

FILED
Mar 31 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998				FLORIDA DEPARTMENT OF STATE Sandra B. Morham 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			
2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip Country 24		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip Country 29		3. Date Incorporated or Qualified 08/03/1983 4. FEI Number 59-2309293 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required 6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> 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 <i>Barbara Mitchell</i> 3/23/98 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE					
12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	SD <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	PALMER, ROXANNE	1.2 NAME			
STREET ADDRESS	3951 GULF DRIVE	1.3 STREET ADDRESS			
CITY-ST-ZIP	SANIBEL FL	1.4 CITY-ST-ZIP			
TITLE	PD <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	MITCHELL, BARBARA ANN	2.2 NAME			
STREET ADDRESS	3951 GULF DRIVE	2.3 STREET ADDRESS			
CITY-ST-ZIP	SANIBEL FL	2.4 CITY-ST-ZIP			
TITLE	D <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	PALMER, RALPH	3.2 NAME			
STREET ADDRESS	3951 GULF DRIVE	3.3 STREET ADDRESS			
CITY-ST-ZIP	SANIBEL FL	3.4 CITY-ST-ZIP			
TITLE	D <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	MILLER, CAROLYN	4.2 NAME			
STREET ADDRESS	3951 GULF DRIVE	4.3 STREET ADDRESS			
CITY-ST-ZIP	SANIBEL FL	4.4 CITY-ST-ZIP			
TITLE	D <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	MILLER, BRUCE	5.2 NAME			
STREET ADDRESS	3951 GULF DRIVE	5.3 STREET ADDRESS			
CITY-ST-ZIP	SANIBEL FL	5.4 CITY-ST-ZIP			
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME		6.2 NAME			
STREET ADDRESS		6.3 STREET ADDRESS			
CITY-ST-ZIP		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 *Barbara Mitchell* **3/23/98** **6/11/1998**

CR2E034 (10/97)