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

PROFIT CORPORATION ANNUAL REPORT

1997

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Feb 04 1997 8:00am

Secretary of State

(912) 882-6875

DI LINTONI, AND RICHE NODER KANDE CERRO BEAN AND AND AND AND ARREST DEADS AND CONTRACTORS OF BE

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # H24705

(6)

ST. MARY'S SEAFOOD & STEAK HOUSE, INC.

										
Principal Place of Business Mailing Address					1	n indiget getin tillet debte føbis heidt hi	11 070 17 010 11 1		01015 1#01	
1837 OSBORNE St. Marys Ga	· · · =	1837 OSBORNE RD. ST. MARYS GA 31558-2	1837 OSBORNE RD. ST. MARYS GA 31558-2515				·			
							 Date Incorporated or Qualified 10/05/1984 		ate of Last F 26/1996	Report
2. Principal Pl.	acc of Business	2a. Mailing Address	2a. Mailing Address				FEI Number			oplied For
21	ORDER TO THE RESIDENCE OF THE PROPERTY OF THE	26	· · · · · · · · · · · · · · · · · · ·				58-1586093	Not Applicable		
Suite, Apt #	F, etc	├ ──¬	Suite, Apt. #, etc.				5. Certificate of Status Desired			Additional
City & State		City & State	v & State							equired
23	•	├ ¬ `	28			'	 Election Campaign Financing Trust Fund Contribution 			May Be to Fees
Zip	Country	Zip	Co	ountry			This corporation has liability for		***************************************	
24	25	29	30	•		1			No	1. 199.002.,
	Name and Address of Current Registered Agent			10. Name and Address of New Regis			egistered	Agent		
WILL	IAMS, MARGARET M.			81	Name	9				
	2 PINE ESTATES RD., E.			82	Street	t Address	(P.O. Box Number is Not Accepta	ible)		
JAC	KSONVILLE FL 32218			L	00000	(7,00,000	(1 to: Don Hambor to Hot Hoodpi			
				83						
				84	City			FL	85 Z(p	Code
11 Purcuant t	o the provisions of Sections 607.0	502 and 607 1508 Florida Sta	tutee the	ahov/	- namod	d corporal	ion submits this statement for the		i	to registered
office or re	egistered agent, or both, in the Sta	ate of Florida. Such change wa	as authoriz	ed by	the cor	rporation's	s board of directors. I hereby acc	purpose o	ointment as	registered
agent. I ar	n familiar with, and accept the obl	igations of, Section 607.0505,	Florida St	atutes	3 .					
SIGNATURE	Signative Type it or printed name of registered i	ancest and title if another able (A	JOTE: Beniste	red Ans	n' tianature	re required wh	nen reinstating)	DATE		
12.		AND DIRECTORS	13		orginalore		ADDITIONS/CHANGES TO OFF		DIRECTOR	RS IN 12
BITLE	DPT	☐ DELETE	1.1	TITLE		T			Change	Addition
NAME	WILLIAMS, DAVID L, JR.		1.2	NAME						
STREET ADDRESS	501 PALMETTO ST.		1.3	STREET	ADDRESS	:				
C-TY - ST - ZIP	ST. MARYS GA		1,4	CITY-S	T - ZIP					
TITLE	STD	☐ DELETE	2.1	TITLE					Change	Addition
NAME	WILLIAMS, MARGARET M.	_	2.2	NAME						
STREET ADDRESS	11042 PINE ESTATES RD., E	••	2.3	STREET	ADDRESS	:				
C:TY - ST - ZIP	JACKSONVILLE FL			CITY-:	ST-ZIP				1-1-2	
TITLE	VD	DELETE		TITLE					Change	Addition
NAME	WILLIAMS, DEBRA			NAME						
STREET ADDRESS	501 PALMETTO ST				ADDRESS					
CITY - ST - ZIP	ST MARYS GA	DELETE		CITY-S	ST-ZIP	- 			TT Ohanas	- Addition
TITLE		☐ DEGUE		TITLE					Change	Addition
NAME PROFEE ADDOCCE				NAME	ADDRESS	. [
STREET ADDRESS					ADDRESS	` [
C-TY - ST - ZIP TITLE		DELETE		CITY - S TITLE	1-202				Change	Addition
NAME		and section		NAME					and allering	Second - 10 or 11 or 1
STREET ADDRESS					ADDRESS	. [
C-TY - S1 - ZIP				CITY-S						
TITLE	NAMES OF THE PROPERTY OF THE P	DELETE		TITLE		1			Change	Addition
NAME			6.2	NAME						
STREET ADDRESS			6.3	STREET	ADDRESS					
C:TY - ST - ZIP			64	CITY-S	T-ZIP					
14. Loo hereb	y certify that the information supply indicated on this annual report o	lied with this filing does not qu	alify for th	e exe	mption s	stated in	Section 119.07(3)(i), Florida Statu	es I funhe	r certily that	the
lam an oʻ	ri indicated on this annual report o ficer or director of the corporation n Block 12 or Block 13 if changed,	or the receiver or trustee emp	powered to	exec	ute this	report as	required by Chapter 607, Florida	Statutes; a	s ir made ur ind that my	name