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

PROFIT CORPORATION ANNUAL REPORT **1999**



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # H53638

EAST BAY VILLAS, INC.

Principal Place	of Business	Mailing Address								
433 HARRISON	ÄVE	P O BOX 1601				1				•
SUITE 1A		PANAMA CITY FL 32402				DO NOT WRITE IN THIS SPACE				
PANAMA CITY FL 32401		us				3. Date Incorporated or Qualifed				
US						04/19/1985				9.6.
	·	To Marie Address				4. FEI Number		' 1 1		ed For
2. Principal Pla	ace of Business	2a. Mailing Address				59-2527414		· · ·		pplicable
21		26				39-2321414		\$8.7		
Suite, Apt. #	ŧ, etc.	Suite, Apt. #, etc.				5. Certifcate of Status Desired		۰۰۰۰ Fee		
22		27							<u> </u>	
City & State		City & State				6. Election Campaign Financin	^g □ .)0 Ma	
23		Zip Country				Trust Fund Contribution			30 10 1	663
Zip								г	INO	
24	25 29 30			Personal Property Tax. Yes No 10. Name and Address of New Registered Agent						
	9. Name and Address of Current	Registered Agent	 -	81	Name	TU. Name and Address of Nev	r Registered F	- Gent		
FIT7	DINONE CANTIEL C			٠'	Name	•				
FITZSIMONS, SAMUEL G.			Ī	82	Street Addre	ess (P.O. Box Number is Not Acce	ptable)			
6018-C EAST HIGHWAY 98			ļ							\$ 81
· PAN	AMA CITY FL 32404			83				2 3		9 18 18 18 18 18 18 18 18 18 18 18 18 18
				84	City			85 Z	ip Co	de
48 83	to Anna to the				•		FL		<u>.</u>	
11. Pursuant to office or reagent. I ar	to the provisions of Sections 607.0502 egistered agent, or both, in the State of m familiar with, and accept the obligati	and 607.1508, Florida Statut of Florida. Such change was a ions of, Section 607.0505, Flo	es, the abuthorized	by t tes.	e-named corpo the corporation	oration submits this statement for the n's board of directors. I hereby acc	ept the appoin	itment as	regis	tered
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable (NOTE	: Registered	Agent	t signature required	when reinstating)	DATE			 ,
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO C	OFFICERS AN	D DIREC	TOR	5 IN 12
TITLE	S	☐ DELETE	1.1 711	LE			•	Chan	ge :	☐ Addition
NAME	MCINVALE, R. T.		1.2 NA	ME	1	•				
	433 HARRISON AVE., STE. 1A		13 ST	RFFT	ADDRESS					
STREET ADDRESS	PANAMA CITY FL									
CITY-ST-ZIP	D D		1/1/07	TV. ST						☐ Addition
TITLE	· f	□ DELETE		TY-ST				☐ Chan	ge	☐ Addition
	FITZGIMONG CAMILEL G	☐ DELETE	2.1 111	LE	,-Br			Chan	ge	Addition
NAME	FITZSIMONS, SAMUEL G.	☐ DELETE	2.1 TII 22 NA	LE ME				☐ Chan	ige	
STREET ADDRESS	214 S. COVE LANE	☐ DELETE	2.1 TIT 2.2 NA 2.3 ST	LE ME REET	ADDRESS			☐ Chan	ige	Addison
STREET ADORESS CITY-ST-ZIP		-	2.1 TIT 22 NA 2.3 ST 2.4 CI	ILE ME REET TY-S	ADDRESS			☐ Chan		Addition
STREET ADDRESS CITY-ST-ZIP TITLE	214 S. COVE LANE	☐ DELETE	2.1 TII 22 NA 2.3 ST 2.4 CI 3.1 TII	TLE ME REET TY-S TLE	ADDRESS					
STREET ADORESS CITY-ST-ZIP TITLE NAME	214 S. COVE LANE	-	2.1 TII 22 NA 2.3 ST 2.4 CI 3.1 TII 3.2 NA	ILE ME REET TY-S ILE ME	ADDRESS T-ZIP					
STREET ADDRESS CITY-ST-ZIP TITLE	214 S. COVE LANE	-	2.1 TII 22 NA 2.3 ST 2.4 CI 3.1 TII 3.2 NA 3.3 ST	TLE REET TY-S TLE ME REET	ADDRESS T-ZIP ADDRESS		· ' à			
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	214 S. COVE LANE	☐ DELETE	2.1 TII 22 NA 2.3 ST 2. 4 CI 3.1 TII 3.2 NA 3.3 ST 3.4. CI	TLE ME REET TY-S TLE ME TREET	ADDRESS T-ZIP ADDRESS		1 1	☐ Chan	nge	☐ Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	214 S. COVE LANE	-	2.1 TII 22 NA 2.3 ST 2. 4 CI 3.1 TII 3.2 NA 3.3 ST 3.4. CI 4.1 TII	TLE TY-S TLE TY-S TLE TY-S TLE TY-S TLE	ADDRESS T-ZIP ADDRESS		1 1		nge	
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	214 S. COVE LANE	☐ DELETE	2.1 TII 22 NA 2.3 ST 2. 4 CI 3.1 TII 3.2 NA 3.3 ST 3.4 CI 4.1 TII 4.2 N	TLE TY-S TLE TY-S TLE TY-S TLE AME	ADDRESS T-ZIP ADDRESS T-ZIP		1 1	☐ Chan	nge	☐ Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	214 S. COVE LANE	☐ DELETE	2.1 TII 22 NA 2.3 ST 2. 4 CI 3.1 TII 3.2 NA 3.3 ST 3.4 CI 4.1 TII 4.2 N	TLE TY-S TLE TY-S TLE TY-S TLE AME	ADDRESS T-ZIP ADDRESS		1 1	☐ Chan	nge	☐ Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	214 S. COVE LANE	☐ DELETE	2.1 TIT 22 NA 23 ST 2.4 CC 3.1 TIT 3.2 NA 3.3 ST 3.4. CC 4.1 TIT 4.2 NA 4.3 ST 4.4 CC	ILE ME REET TY-S ILE REET TY-S TLE AME REET TY-SI	ADDRESS T-ZIP TADDRESS T-ZIP TADDRESS		1 1	☐ Char	nge	☐ Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	214 S. COVE LANE	☐ DELETE	2.1 TII 22 NA 2.3 ST 2.4 CI 3.1 TII 3.2 NA 3.3 ST 3.4. CI 4.1 TII 4.2 NA 4.3 ST 4.4 CI 5.1 TII	TLE TY-S TLE	ADDRESS T-ZIP TADDRESS T-ZIP TADDRESS		1 1	☐ Chan	nge	☐ Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	214 S. COVE LANE	☐ DELETE	2.1 TII 22 NA 2.3 ST 2.4 CI 3.1 TII 3.2 NA 3.3 ST 3.4. CI 4.1 TII 4.2 NA 4.3 ST 4.4 CI 5.1 TII 5.2 NA	ILE TY-S TLE TY-S TLE TY-S TLE TY-S TLE TY-S TLE TY-SI TLE	ADDRESS T-ZIP ADDRESS T-ZIP FADORESS T-ZIP FADORESS T-ZIP		1	☐ Char	nge	☐ Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE TITLE	214 S. COVE LANE	☐ DELETE	2.1 TII 22 NA 2.3 ST 2.4 CI 3.1 TII 3.2 NA 3.3 ST 3.4. CI 4.1 TII 4.2 NA 4.3 ST 4.4 CI 5.1 TII 5.2 NA 5.3 ST	ILE ME REET TY-S ILE ME REET TY-S ILE AME TY-SI ILE AME TREET	ADDRESS T-ZIP ADDRESS T-ZIP FADORESS T-ZIP FADORESS T-ZIP		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	☐ Char	nge	☐ Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	214 S. COVE LANE	DELETE DELETE DELETE	2.1 TII 22 NA 2.3 ST 2.4 CI 3.1 TII 3.2 NA 3.3 ST 3.4. CI 4.1 TII 4.2 NA 4.3 ST 4.4 CI 5.1 TII 5.2 NA 5.3 ST	THE TY-S'	ADDRESS T-ZIP ADDRESS T-ZIP FADORESS T-ZIP FADORESS T-ZIP		1 A	☐ Char	nge :	Addition Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	214 S. COVE LANE	☐ DELETE	2.1 TII 22 NA 2.3 ST 2.4 CI 3.1 TII 3.2 NA 3.3 ST 3.4. CI 4.1 TII 4.2 NA 4.3 ST 4.4 CI 5.1 TII 5.2 NA 5.3 ST	ILE ME REET TY-S ILE ME REET TY-S ILE AME TY-SI ILE TY-SI TLE TY-SI TLE TY-SI TLE	ADDRESS T-ZIP ADDRESS T-ZIP FADORESS T-ZIP FADORESS T-ZIP		1 A	☐ Char	nge :	☐ Addition

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 the 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 appropriate to effect the supplemental annual report as required by Chapter 607, Florida Statutes; and that my name appears in

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

STREET ADDRESS

FILED

Jan 23, 1999 8:00am

Secretary of State

01-23-1999 90041 044 ***150.00