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

**PROFIT CORPORATION ANNUAL REPORT** 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name H59201

(4)

SOUTH BAY PROPERTIES, INC.

**FILED** Jan 20 1998 8:00am Secretary of State



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Principal Place of Business Mailing Address					3 SEMINIC MINI MINIM INIIN INIIN	JUSUS 1191 91811 818	11 ATELL ALOU FIR	II MEMEE IM DE
27119 OAKWOOD LAKE DR. 27119 OAKWOOD LAKE DR.								
BONITA SPRINGS FL 34134 BONITA SPRINGS FL 33923					DO NOT WRITE IN THIS SPACE			
					3. Date Incorporated or Qua			1
					05/29/1985			
	Place of Business	2a. Maiting Address	<u> </u>	^-	4. FEI Number		Ar	pplied For
	1 Charing Cross Cir.	26 20631 Chari	مريده:	ss Cir.	59-2540088		No	ot Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc. 27					5. Certificate of Status Desire	ed 💢 be	\$8.75 Additional Fee Required	
City & State  28 ESTERS ,			FL		6. Election Campaign Finance		•	May Be
Zip	Country	Zip Zip		<del></del>	Trust Fund Contribution	<u> </u>		to Fees
24 339 2		— nenn	Gountr	۶	This corporation owes or I     Personal Property Tax due	,	<b>-</b>	tangible DNo
, -	9. Name and Address of Curren	. 1=+1 +-	30]		10. Name and Address of N		<u> </u>	_ NO
,Æ1	RONIMUS, DAVID C		81	1 Name				
	119 OAKWOOD LAKE DR.		   D/	9 Stront Add	roon (D.O. Boy Number in Not A-	nontoble'		
BONITA SPRINGS FL 34134				Street Address (P.O. Box Number is Not Acceptable)  2063/ Chating Cross Circle				
			83		۵			
			84	4 City			OE 7in	Code
			1	Es	tero	FL	_ 85 Zip (	Code 928
onice or r	to the provisions of Sections 607.050; egistered agent, or both, in the State im familiar with, and accept the obliga	of florida. Such change was a	uthorized b	by the corporat	poration submits this statement fo tion's board of directors. I hereby	accept the app	pointment as	ts registered registered
SIGNATURE	Dal Com	~ , DAVID	c. Je	ERON 11	MUS	12)3	10/97	
10	Signature, typed or printed name of registered ago			ent signature requir	red when reinstating)	DATE		
12. TITLE	PTD OFFICERS AND	DELETE	13.		ADDITIONS/CHANGES TO	OFFICERS AN		
NAME	JERONIMUS, DAVID C		1.7 TITLE 1.2 NAME				Change	☐ Addition
STREET ADDRESS	27119 OAKWOOD LAKE DR.				681 Charing Cross	Cicale	ì	
CITY-ST-ZIP	BONITA SPRINGS FL		1.3 STACE	CT 710	ster FL 339	28	•	
TITLE	VD	DELETE	2.1 TITLE	21-41P	3(20) 14 33	. 00	Change	Addition
NAME	JERONIMUS, JULIE A		2.2 NAME				M Orlange	Addition
STREET ADDRESS	27119 OAKWOOD LK. DR.			I .	LRI Charina Coas	· Circl	•	
CITY-ST-ZIP	BONITA SPRINGS FL		2.4 CITY-	SI-7IP	681 Charing Cross sters. FL 389	28	4	
TITLE		DELETE	3.1 TITLE	31 Eii	<del></del>		Change	Addition
NAME		<del></del>	3.2 NAME					
STREET ADDRESS				T ADDRESS				
CITY-ST-ZIP			3.4. CITY-					
TITLE		☐ DELETÉ	4.1 TITLE				Change	Addition
NAME			4. 2 NAME				• •	
STREET ADDRESS			4.3 STREET	T ADDRESS				
CITY-ST-ZIP			4.4 CITY-5					
TITLE		☐ DELETE	51 TITLE				Change	Addition
NAME			5.2 NAME				-	
STREET ADDRESS			5.3 STREET	T ADDRESS				
CITY-ST-ZIP			5.4 CITY - 5					
TITLE		DELETE	6.1 TITLE			-	Change	Addition
NAME			6.2 NAME				-	•
STREET ADDRESS			6.3 STREET	I ADDRESS				
CITY-ST-ZIP			6.4 CITY- S					

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.