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

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

2 CITY-ST-ZIP

TITLE

NAME

CITY-ST-ZIP

TITLE NAME



## Sandra B. Mortham

**FILED** May 16 1997 8:00am Secretary of State

Change

Change

4/30/97 (813) 530-5522

Addition

☐ Addition

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE  Sandra B. Mortham  Socretary of State  DIVISION OF CORPORATIONS		m	May 16 1997 8:00a Secretary of State	
	MENT # J16080 I ISLAND WAY, INC.	(0)	:			
Principal Place of Business  W. R. KELLEY JOHNSON 16167 US HWY 19 N 680 CLEARWATER FL 34824 US		Mailing Address  No. KELLEY JOHNSON 18167 US HWY 19 N 680 CLEARWATER FL 34624-656 US	89		Date Incorporated or Qualified 3a. Date of Last Report	
	lace of Business	2a. Mailing Address			05/23/1986         05/01/1996           4. FEI Number         Applied For	
Suite, Apt. 22 City & State	#, etc.	26 Suite, Apt. #, etc.			59-2676382 Not Applicab  5. Certificate of Status Desired XX \$8.75 Additional Fee Regulred	
		City & State	*		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	
23 Zip 24	Country 25 9, Name and Address of Currer	Zip 29	Count 30	ry	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No  10. Name and Address of New Registered Agent	
1816 660 CLE	LEY, JOHNSON R 87 US HWY 19 N  ARWATER FL 34624  to the provisions of Sections 607.050 registered agent, or both, in the State im familiar with, and accept the oblight	)2 and 607.1508, Florida Statute of Florida. Such change was a ations of, Section 607.0505, Flo	8 s, the abouthorized	3 City  ve-named corby the corpora	FL 85 Zip Code  poration submits this statement for the purpose of changing its registerestion's board of directors. I hereby accept the appointment as registered	
SIGNATURE	Signature, typed or printed name of registered age		l i		ilred when reinstating) DATE	
12.	12. OFFICERS AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS	DS EZELL, NEIL 18187 US HWY 19 N 680 CLEARWATER FL	DELETE		EET ADDRESS	Change Addition	
CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	VT JOHNSON, RICHARD C. 18167 US HWY 19 N 660	☐ DELETE	2.1 TITL 2.2 NAM	1	☐ Change ☐ Addition	
TITLE NAME	CLEARWATER FL DP JOHNSON, R.KELLEY	[_] DELETE	2. 4 CITY 3.1 TITU 3.2 NAM	r-st-zip E	Change Addition	
STREET ADDRESS CITY-ST-ZIP TITLE	18167 US HWY 19 N 660 CLEARWATER FL	DELETE		EET ADDRESS (-ST-ZIP	Change Addition	

64 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 if changed, or on an atlantment with an address.

R. KELLEY JOHNSON

4.3 \$TREET ADDRESS

5.3 \$TREE1 ADDRESS

6.3 STREET ADDRESS

5.4 ÇITY-ST-ZIP

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

6.1 (TLE

6.2 NAME

DELETE

DELETE