

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT

1995



FLORIDA DEPARTMENT OF REVENUE
TALLAHASSEE, FLORIDA
3500 GUNN STREET, N.W.
TALLAHASSEE, FLORIDA 32309-0001
TELEPHONE (904) 493-2000
FAX (904) 493-2001

APPROVED
AND
FILED

DOCUMENT # J46108

(3)

95 MAY -T- 11 8:28

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ADVENTURES IN PARADISE, INC.

Principal Office Location: 2323 WOOSTER LANE
STE - 3
SANIBEL ISLAND FL 33957
US

2. Principal Office Location: 2323 WOOSTER LANE
STE - 3
SANIBEL ISLAND FL 33957
US

3. Date Incorporated or Qualified: 12/09/1986
3a. Date of Last Report: 05/01/1994
4. FEI Number: 59-2740071
5. Certificate of Status Desired: ☒ \$8.75 Additional Fee Required
6. Election Campaign Financing: ☐ \$5.00 May Be Added to Fees
7. This Corporation has liability for intangible tax under SS 190.032 Florida Statutes: ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

STEWART, CRAIG R.
464 CASA YBEL RD.
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 (b)(3) and 607 (b)(4) 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. Thereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607 (b)(5) Florida Statutes.

SIGNATURE

(Signature of Registered Agent or Officer/Shareholder)

(Signature of Registered Agent or Officer/Shareholder)

(Signature)

12. OFFICERS AND DIRECTORS
NAME: STEWART, CRAIG R.
STREET ADDRESS: 464 CASA YBEL RD.
CITY: SANIBEL ISLAND FL
NAME:
STREET ADDRESS:
CITY:
NAME:
STREET ADDRESS:
CITY:
NAME:
STREET ADDRESS:
CITY:
NAME:
STREET ADDRESS:
CITY:
NAME:
STREET ADDRESS:
CITY:

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS
NAME: ☐ Change ☐ Addition
STREET ADDRESS: ☐ Change ☐ Addition
CITY: ☐ Change ☐ Addition
NAME: ☐ Change ☐ Addition
STREET ADDRESS: ☐ Change ☐ Addition
CITY: ☐ Change ☐ Addition
NAME: ☐ Change ☐ Addition
STREET ADDRESS: ☐ Change ☐ Addition
CITY: ☐ Change ☐ Addition
NAME: ☐ Change ☐ Addition
STREET ADDRESS: ☐ Change ☐ Addition
CITY: ☐ Change ☐ Addition
NAME: ☐ Change ☐ Addition
STREET ADDRESS: ☐ Change ☐ Addition
CITY: ☐ Change ☐ Addition

14. I, the undersigned, certify that the information supplied with this report was voluntarily furnished and does not qualify for the exemption stated in Sections 190.032 Florida Statutes. That I am fully aware of the information required on this annual report or supplemental annual report, and I am certifying 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 registered agent responsible for filing this report as required by Chapter 190, Florida Statutes, and that my name appears in Block 1, or Block 13, of this report as required by law with an address.

SIGNATURE:

(Signature of Registered Agent or Officer/Shareholder)

4/27/95