

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

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Montiam  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # **M48538** (6)

1. Corporation Name  
**301 10TH ST. ASSOCIATES, INC.**



Principal Place of Business  
**P O BOX 9818  
RIVIERA BCH FL 33419**

Mailing Address  
**P O BOX 9818  
RIVIERA BCH FL 33419**

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24

2a. Mailing Address

26 State, Apt. #, etc.

27 City & State

28 Zip Country

29 30

9. Name and Address of Current Registered Agent

**EAKINS, DOUGLAS S  
300 WEST TENTH STREET  
RIVIERA BEACH FL 33404**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

3. Date Incorporated or Qualified  
**03/17/1987**

3a. Date of Last Report  
**05/01/1995**

4. FEI Number  
**59-2792732**

Applied For  
Not Applicable

5. Certificate of Status Direct

**\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution

**\$5.00 May Be Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes  Yes  No

10. Name and Address of New Registered Agent

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

*Doyle*

**DOUGLAS S. EAKINS, PRESIDENT**

**4-24-96**

12.

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

**PD  
EAKINS, DOUGLAS S.  
300 W. 10TH STREET  
RIVIERA BCH. FL**

**TD  
EAKINS, SANDI F.  
300 W. 10TH STREET  
RIVIERA BCH. FL**

**VPD  
CLEARY, JOHN P.  
300 W. 10TH STREET  
RIVIERA BCH. FL**

**SD  
CLEARY, TIMOTHY P.  
300 W. 10TH STREET  
RIVIERA BCH. FL**

DELETE

DELETE

DELETE

DELETE

DELETE

13.

1. TITLE  
2. NAME  
3. STREET ADDRESS  
4. CITY - ST - ZIP  
5. TITLE  
6. NAME  
7. STREET ADDRESS  
8. CITY - ST - ZIP  
9. TITLE  
10. NAME  
11. STREET ADDRESS  
12. CITY - ST - ZIP  
13. TITLE  
14. NAME  
15. STREET ADDRESS  
16. CITY - ST - ZIP  
17. TITLE  
18. NAME  
19. STREET ADDRESS  
20. CITY - ST - ZIP

Change  Addition

Change  Addition

Change  Addition

Change  Addition

Change  Addition

Change  Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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. One or more attachments may be attached.

**SIGNATURE: *Sandi Eakins* AS TREASURER 4-24-96 (407) 842-0001**

**SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
SANDI F. EAKINS**

CR2E084 (12/95)