F	PLEASE READ CATION OR ATEMENT	FLORID	FRUCTIONS A DEPARTME Katherine Ha Secretary of S IVISION OF CORPO	NT OF STATE arris State	7	FIL	ED	
DOCUM 1. Corporation N	- $ -$	5		99 JUN 23 7				
St. Johns Trading Plaza Association, a Florida not-for-profit corporati					1	า้งยังสาน	E FLCHIDA	
Principal Place o	f Business	ess		17				
	meadows Road O Jacksonville,	FL 322!	56 - - Suit e	aymeadows 9 400 — nville, F		CTATE	ACAIT	<i>0</i> 0.0
If above addres	ses are incorrect in any way, line thru Office Address, If Applicable	nformation and enter	nation and enter correction below. Office Address, If Applicable 4. Date Incorporated or Qualified					
			qua-East Surf Shop			Business in Florida		
C/o Aqua-East Surf Shop City & State		696 A City & State	Atlantic 1	Blvd.	5. FEI Number Applied For ✓ Not Applicable			
St. Augu	stine FL 32084	Zip Nej	otune Read	çh, FL 32	266 CERTIFICAT	E OF STATUS DESIRED	S8.75 Additio	onal Fee required
7. Names and S	treet Addresses of Each Officer and/	or Director (Fto	rida nonprofit corpora	itions must list at lea	l		for a Certif	
Title(s)	Name of Officers and/or Directors		l Of	eet Address of Each ficer and/or Director se Post Office Box N		4	City / State / Zip	
D/ P G	. Alexander Fors	yth, I	II 696 A	tlantic B	lvd.	Neptune I	Beach, F	L 32266
D/T B	Bob Cox 1631			iversity	Blvd.	Jacksonv:	llle, FL	32256
D/S L	D/S Lenny Klink			38 Hope Street			stine, F	L 32084
					Eil		22886 901100- .25 ****	-004
	8. Name and Address of Current F	Registered Age	ınt	T	9. Name and A	Address of New Regi	stered Agent	
	Name G. Al							
Claude Smith, Jr. 9250 Baymeadows Road Jacksonville, FL 32256				Street Address (P.O. Box Number is Not Acceptable) 696 Atlantic Blvd. Suite. Apt. #, Etc.				
				Neptune Beach, State Zip Code FL 32266				
10. I, being appointed the region ed agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. Signature of Registered Agent Date June 2/, 1999								
	corporation owes the ible Personal Proper			Yes	□ No 🏻	(See d	other side for inform on intangible tax.)	
this reinstaten owed by the o	am an officer or director or the receivent application, the reason for disso corporation have been paid and the nation is true and accurate, and my sig	lution has been ames of individ	eliminated, the corpouts the corpout of the corporate of	rate name satisfies to m do not qualify for a	the requirements an exemption und	of section 607.0401 d	r 617.0401, F.S., 1	hat all fees
SIGNATUR	E: SIGNATURE AND TYPED OR PAR				dent	(904) Date	246-770 Daytime Phon	