FILED

Secretary of State

08-01-2003 90064 044 ***550.00

Aug 01, 2003 8:00 am

2003 FOR PROFIT CORPORATION

UNIFORM BUSINESS REPORT (UBR)

P00000079239 DOCUMENT # 1. Entity Name

SEARS' MARKET ON THE ISLAND, INC. Principal Place of Business Mailing Address 655 PENSACOLA BEACH BOULEVARD 655 PENSACOLA BEACH BOULEVARD PENSACOLA BEACH FL 32561 PENSACOLA BEACH FL 32561 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES City & State City & State Applied For 4. FEI Number 59-3664541 Not Applicable Zip Country Country Zip \$8.75 Additional 5. Certificate of Status Desired ____ Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent SEARS, JERRY D JR. Street Address (P.O. Box Number is Not Acceptable) 6913 SEA BASS CR NARARRE FL 32566 8. The above named entity submits this statement for the purpose of charging its registered of e or registered agent, or both, in the State of Florida. I am familia the obligations of registered agent. SIGNATURE ent and tile if applicable (NOTE: Registered Ages Signature, typed or printe signature required when reinstating) DATE FILE NOW!!! FEE IS \$550,00 9. Election Campaign Financing \$5.00 May Be After September 10, 2003 Fee will be \$750.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE ☐ Delete TITI F ☐ Addition SEARS, JERRY D JR. NAME NAME 655 PENSACOLA BEACH BOULEVARD STREET ADDRESS STREET ADDRESS PENSACOLA BEACH FL 32561 CITY-ST-ZIP CITY-ST-ZIP Delete TITLE Addition TITLE ☐ Change arol NAME NAME STREET ADDRESS STREET ADDRESS 3256-CITY-ST-ZIF CITY-ST-ZIP* TITLE Delete TITLE ☐ Change ☐ Addition NAMÉ STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE Delete TITLE ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete ☐ Change ☐ Addition NAME NAME

12. 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 report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation or the receiver or flustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

STREET ADDRESS

STREET ADDRESS

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CITY-ST-ZIP

TITLE

NAME

SIGNATURE:

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STREET ADDRESS

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Date

39016802 55278 17 0168689407901 39016802 55278 17 3,988.29 TOTAL Transaction Date: 23Jul.2003 12:13:24 HIXED DEPOSIT Bus. Date 23Jul.2003 AM 2,650.00 CASH

Deposits are accepted subject to subsequent verification by the bank and subject to the terms as stated on deposit tickets currently furnished by the bank to its depositors. Deposits may not be available for immediate withdrawal. \$100 of the total deposits made on a business day may 700250 (9/01)

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Date

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0168689407901

Bus. Date 23Jul.2003 AM

39016802 55278 17 Transaction Date: 23Jul.2003 12:06:54 919.84 TOTAL

Deposits are accepted subject to subsequent verification by the bank and subject to the terms as stated on deposit tickets currently furnished by the bank to its depositors. Deposits may not be available for immediate withdrawal. \$100 of the total deposits made on a business day may 700250 (9/01)