

2004 FOR PROFIT CORPORATION ANNUAL REPORT

4/30/2

FILED
Jul 02, 2004 8:00 am
Secretary of State

04-30-2004 90288 050 ***150.00

DOCUMENT # P03000015505 1. Entity Name TRADEWINDS OF BAY COUNTY BEACH SERVICES, INC.			
Principal Place of Business 12889 EMERALD COAST PKWY., STE. 111-A DESTIN, FL 32550		Mailing Address 12889 EMERALD COAST PKWY., STE. 111-A DESTIN, FL 32550	
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number 41-8140059		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent HENRY, THOMAS B JR. 12889 EMERALD COAST PKWY., STE. 111-A DESTIN, FL 32550		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE _____ Signature, typed or printed name of registered agent and state if applicable. (NOTE: Registered Agent signature required when reappointing)			
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete President Thomas B. Henry Jr. 12889 Emerald Coast Pkwy., Suite 111-A Destin, FL 32550	☐ Change ☐ Addition	TITLE NAME STREET ADDRESS CITY - ST - ZIP
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 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 807, 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.			
SIGNATURE: <u>Thomas B. Henry Jr.</u> Thomas B. Henry Jr. 4-19-2004 (850) 654-4818 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNED OFFICER OR DIRECTOR			