## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P9300007947

CEDAR VILLAGE SHOPPING SHACKS, INC.

Mailing Address

## **FILED** May 17, 1999 8:00 am Secretary of State

05-17-1999 90005 045 \*\*\*150.00



Principal Place of Business 15618 FRONT BEACH ROAD 15618 FRONT BEACH ROAD PANAMA CITY BEACH FL 32407 PANAMA CITY BEACH FL 32407 DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualifed 02/01/1993 Applied For 2a. Mailing Address 4. FEI Number 2. Principal Place of Business 59-3163661 Not Applicable 26 21 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 27 22 City & State \$5.00 May Be City & State Election Campaign Financing Added to Fees 28 Trust Fund Contribution 23 Country Country Zip This corporation owes the current year Intangible Zip □No 24 25 29 30 Personal Property Tax. 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name CARTER, MACK A. Street Address (P.O. Box Number is Not Acceptable) 114 BOCA LAGOON DR. PANAMA CITY FL 32407 83 Zip Code City 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. Change ☐ Addition DVP ☐ DELETE 11 TITLE TITLE CARTER, MACK A 1.2 NAME NAME 114 BOCA LAGOON DRIVE 1.3 STREET ADDRESS STREET ADDRESS PANAMA CITY BEACH FL 14 CiTY-ST-ZIP CITY-ST-ZIP Change Addition □ DELETE 2.1 TITLE TITLE 22 NAME BRADLEY, JOHNNY W. 17751 FRONT BEACH ROAD 2.3 STREET ADDRESS STREET ADDRESS

PANAMA CITY BEACH FL 2. 4 CITY-ST-ZIF CITY-ST-ZIP ☐ Change ☐ Addition DELETE 3.1 TITLE TITLE CARTER, LEIGH A 3.2 NAME NAME 114 BOCA LAGOON DRIVE 3.3 STREET ADDRESS STREET ADDRESS PANAMA CITY BEACH FL 3.4. CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition DELETE 4.1 TITLE TITLE 4. 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Addition Change ∏ ຄF⊩FTE 5.1 TITLE TITLE 52 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP City-st-zip ☐ Change ☐ Addition 6.1 TITLE DELETE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP CITY-ST-ZIP

14. 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 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, or on an attachment with an address, with all other like empowered.

AND TYPED OR PRINTED TAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #

CR2E034 (11/98)