FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

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

APPROVED AND FILED
95 MAY -1 AM 10:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P93000009130 (4)

1. Corporation Name
SEA SCREAMER OF PANAMA CITY, INC.

Principal Place of Business	Mailing Address
3601 THOMAS DRIVE PANAMA CITY BEACH FL 32408 US	3601 THOMAS DRIVE PANAMA CITY BEACH FL 32408 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 02/05/1993
3a. Date of Last Report: 04/29/1994

2. Principal Place of Business (21)	2a. Mailing Address (26): 112 Palm Harbor Blvd.
Suite, Apt. #, etc (22)	Suite, Apt. #, etc (27)
City & State (23)	City & State (28): Panama City, Florida
Zip (24) / Country (25)	Zip (29): 32408 / Country (30)

4. FEI Number: 59-3166126 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $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

9. Name and Address of Current Registered Agent

SHOBE, DAVID C
501 EAST KENNEDY BLVD.
SUITE 1700
TAMPA FL 33602

10. Name and Address of New Registered Agent

01 Name: Scott Rudisill
02 Street Address (P.O. Box Number is Not Acceptable): 112 Palm Harbor Blvd
03 Panama City Beach, FL 32408
04 City: FL 05 Zip Code: 32408

Scott filling in

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 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: Scott Rudisill [redacted] DATE

12. OFFICERS AND DIRECTORS

			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE / NAME / STREET ADDRESS / CITY ST ZIP	D FOSSTER, WILLIAM DOUGLA 100 CORONADO DRIVE CLEARWATER FL	11 TITLE 12 NAME 13 STREET ADDRESS 14 CITY ST ZIP	☑ Change ☐ Addition Delete
TITLE / NAME / STREET ADDRESS / CITY ST ZIP	D RUDISILL, ROBERT SCOTT 112 PALM HARBOR BLVD PANAMA CITY FL	21 TITLE 22 NAME 23 STREET ADDRESS 24 CITY ST ZIP	☑ Change ☐ Addition President
TITLE / NAME / STREET ADDRESS / CITY ST ZIP		31 TITLE 32 NAME 33 STREET ADDRESS 34 CITY ST ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY ST ZIP		41 TITLE 42 NAME 43 STREET ADDRESS 44 CITY ST ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY ST ZIP		51 TITLE 52 NAME 53 STREET ADDRESS 54 CITY ST ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY ST ZIP		61 TITLE 62 NAME 63 STREET ADDRESS 64 CITY ST ZIP	☐ 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)(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.

SIGNATURE: Scott Rudisill Scott Sign + Date [redacted] 4/19/95 904-235-1819

SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL OFFICER OR DIRECTOR

0031403 CP