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

Mailing Address

**PROFIT** CORPORATION ANNUÂL REPORT

1997

Principal Place of Business

STREET ADORESS

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

**FILED** 

Mar 05 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P93000068110 (4)

PONTE VEDRA MARKETING, INC.

339 SAN JUAN DRIVE PONTE VEDRA FL 32082		339 SAN JUAN DRIVE PONTE VEDRA FL 32082-1819				
					<ol> <li>Date Incorporated or Qualified 09/21/1993</li> </ol>	3a. Date of Last Report 05/31/1996
2. Principa Place of Business 2a. Mailing Add			SS		4. FEI Number	Applied For
21		26		59-1674992	Not Applicable	
Suite, Apt #, etc 22		Suite, Apt. #, (			5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stat	te	City & State			Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees
Zφ	Country	<i>7</i> ip	Cou	ntry	8. This corporation has liability for i	
24	25	[29]	30		Fiorida Statutes L.  10. Name and Address of New Re	Yes No
<u></u>	9, Name and Address of Curre	ent Hegistereo Agent		81 Name	10. Name and Address of New He	gistered Agent
	LIAMS, ROBERT V			Name		
339 SAN JUAN DRIVE PONTE VEDRA FL 32082				82 Street Add	dress (P.O. Box Number is Not Acceptable)	
ror	ALE AEDUV LE SEASE		:	83		
ı				<b>84</b> City		85 Zip Code
maama, maama	607.00	00 4 007 41 00 10-24	Cial day the el		poration submits this statement for the p	
office or i	registered agent, or both, in the Statent Lamil ar with, and accept the obli	le of Florida. Such chanc	ie was authorizei	d by the cornors	ation's board of directors. I hereby accep	t the appointment as registered
SIGNATURE	Stock invitige Alor point dinable of registered a	gent and the if applicable	(NOTE Registere	d Agent signature requ	ired when reinstating)	DATE
12.	OFFICERS A	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTORS IN 12
1111.6	P	☐ DEL	ETE 1.1 TI	TLE		ERS AND DIRECTORS IN 12  Change Addition
NAME	WILLIAMS, ROBERT V		1.2 N	AME		
STREET ALIONISS			1.3 \$1	REET ADDRESS		
City-St-7iF	PONTE VEDRA FL 32082	□ DEU		TY - ST - ZIP		Change Addition
TIFLE	VP	[] DEL				L Change L Addition
NAMI	WILLIAMS, ROSITA V		2.2 N			
STEEL ALORESS	339 SAN JUAN DRIVE			REET ADDRESS		
City S1 7IP TITLE	PONTE VEDRA FL 32082	□ DFU		ITY - ST - ZIP		Change Addition
NAME			3.2 N	,		
STEEL FATCHERS				REET ADDRESS		
C(TY-ST-Z)I				ITY-ST-ZIP		
TITLE		DEL			<del></del>	Change Addition
NAME			4.2 N	AME		
STREET AFORESS			4.3 S	REET ADDRESS		
CHY-51-20				TY-ST-ZIP		
TIFLE	10 10 10 10 10 10 10 10 10 10 10 10 10 1	☐ DEI	ETE 5.1 TI	TLE	60000210 -03/05/97010	Change Addition
NAME			5.2 N	AME '	-03/05/97010	73052
SPEEFT ADDRESS			535	reet address	***165.00	0.00
CDY STZE				TY-ST-ZIP	***10J.UU	
IHLE		☐ DEI				☐ Change ☐ Addition
<b>LAME</b>			62 N	AME		M 29

6.3 STREET ADDRESS 6.4 CiTY-ST-ZIP 14. Too hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information and caused 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 plustee employered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 it prainged, g) on an atrachorent with advances.