

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

FILED

Mar 04 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P94000003786 (8)

1. Corporation Name

SEASIDE INTERIORS, INC.



Principal Place of Business

BEACHWALK CENTRE, UNIT 2
7103 HWY 98 W.
PANAMA CITY BEACH FL 32407

Mailing Address

BEACHWALK CENTRE, UNIT 2
7103 HWY 98 W.
PANAMA CITY BEACH FL 32407-4809

3. Date Incorporated or Qualified

01/07/1994

3a. Date of Last Report

03/13/1996

4. FEI Number

59-3215612

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

HOBBS, GEROLYN G
BEACHWALK CENTRE, UNIT 2
7103 HWY 98 W.
PANAMA CITY BEACH FL 32407

10. Name and Address of New Registered Agent

81 Name

Henry Lawrence Perry

82 Street Address (P.O. Box Number is Not Acceptable)

314 Magnolia Ave.

83

P.O. Box 710

84 City

Panama City

FL

85 Zip Code

32402

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 607.0905, Florida Statutes.

SIGNATURE

Signature, type or printed name of registered agent and title if applicable

(Note: Registered Agent signature required when reinstating)

DATE

2-19-97

12. OFFICERS AND DIRECTORS

TITLE	P	<input checked="" type="checkbox"/> DELETE
NAME	HOBBS, GEROLYN G	
STREET ADDRESS	BEACHWALK CENTRE, UNIT 2, 7103 HWY 98 W.	
CITY-ST-ZIP	PANAMA CITY BEACH FL 32407	
TITLE	VS	<input checked="" type="checkbox"/> DELETE
NAME	HOBBS, KELON L JR	
STREET ADDRESS	BEACHWALK CENTRE, UNIT 2, 7103 HWY 98 W.	
CITY-ST-ZIP	PANAMA CITY BEACH FL 32407	
TITLE	T	<input checked="" type="checkbox"/> DELETE
NAME	HOBBS, PAIGE B	
STREET ADDRESS	BEACHWALK CENTRE, UNIT 2, 7103 HWY 98 W.	
CITY-ST-ZIP	PANAMA CITY BEACH FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	President	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	Redfield, Michael	
1.3 STREET ADDRESS	7103 Hwy 98 W	
1.4 CITY-ST-ZIP	Panama City Beach FL 32407	
2.1 TITLE	Vice President	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	Henry L. Perry	
2.3 STREET ADDRESS	7103 HWY 98 West	
2.4 CITY-ST-ZIP	Panama City Beach FL 32407	
3.1 TITLE	Secretary	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	Be Pam Perry	
3.3 STREET ADDRESS	7103 Hwy 98 W	
3.4 CITY-ST-ZIP	Panama City Bch FL 32407	
4.1 TITLE	Treasurer	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	Jackie Redfield	
4.3 STREET ADDRESS	7103 Hwy 98 W	
4.4 CITY-ST-ZIP	Panama City Bch, FL 32407	
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I do 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Henry L. Perry 2/17/97

D.O.C.

Daytime Phone #

901-784-9000 ext 218

CR2E034 (9/96)