

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

FILED
Feb 22, 1999 8:00 am
Secretary of State

02-22-1999 90121 043 ***150.00

0391698

DOCUMENT # P94000046149

1. Corporation Name

STILL WATERS DEVELOPMENT, INC.



Principal Place of Business

2002 N. LOIS AVENUE
STE. 410
TAMPA FL 33607

Mailing Address

2002 N. LOIS AVENUE
STE. 410
TAMPA FL 33607

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address	
21	5603 ANDERSON RD.	26	5603 ANDERSON RD.
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
22		27	
City & State		City & State	
23	TAMPA, FL.	28	TAMPA, FL.
Zip		Zip	
24	33614	29	33614
Country		Country	
25	U.S.A.	30	U.S.A.

3. Date Incorporated or Qualified

06/16/1994

4. FEI Number

59-3247662

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible

Personal Property Tax.

☐ Yes

☒ No

9. Name and Address of Current Registered Agent

BIRD, JAMES R
2002 N. LOIS AVENUE
STE. 410
TAMPA FL 33607

10. Name and Address of New Registered Agent

81 Name

BIRD, JAMES R.

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

5603 ANDERSON RD.

83

84 City

TAMPA, FL. 33614

FL

85 Zip Code

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

James R. Bird

1-6-99

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	DVP	<input checked="" type="checkbox"/> DELETE
NAME	CORDELL, JOHN A JR.	
STREET ADDRESS	10024 KENDA DRIVE	
CITY-ST-ZIP	RIVERVIEW FL	
TITLE	PTD	<input type="checkbox"/> DELETE
NAME	BIRD, JAMES R R.	
STREET ADDRESS	18034 WAYNE RD.	
CITY-ST-ZIP	ODESSA FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	BIRD, GEORGE R	
STREET ADDRESS	11898 FEATHERWOOD DRIVE	
CITY-ST-ZIP	ST. LOUIS MI	
TITLE	SD	<input type="checkbox"/> DELETE
NAME	CARLTON, ALICE	
STREET ADDRESS	P.O. BOX 3052 N/A	
CITY-ST-ZIP	BRANDON FL	
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	DVP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	GEORGE R. BIRD	
1.3 STREET ADDRESS	11898 FEATHERWOOD DR.	
1.4 CITY-ST-ZIP	ST. LOUIS, MO.	
2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
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 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.

SIGNATURE: James R. Bird

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-7-99

Date

813-886-7761

Daytime Phone #

CR2E034 (11/98)