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

**PROFIT CORPORATION** ANNUAL REPORT 1998

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS **FILED** 

Feb 06 1998 8:00am

Secretary of State

1. Corporation	MENT # P9400 D SURF SHOP OF GAINES	0054146 (3) VILLE, INC.	)			
Principal Plac	ce of Business	Mailing Address			1 10031000 310 10111 31011 00111 00111 00111 00111 01111	01001 HBH 01018 01/1 1001
407 C STREE	<b>ET</b>	3706 NW 43RD ST				
ST AUGUSTINE FL 32804		GAINESVILLE FL 32806				
US		U\$			DO NOT WRITE IN THIS S	PACE
1					3. Date Incorporated or Qualified	
9 Principal D	Place of Business	2a. Mailing Address			07/22/1994 4. FEI Number	··· · · · · · · · · · · · · · · · · ·
<b>├</b> ──	Tace of business	<u>├</u> ~-1				Applied For
Suite, Apt.	#. etc.	Suite, Apt. #, etc.			59-1713703	Not Applicable
22	.,	27			5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stat	'e	City & State			6. Election Campaign Financing	\$5.00 May Be
23		28			Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Countr	у	8. This corporation owes or has paid the curre	
24	25	29	30		Personal Property Tax due June 30.	Yes 🔲 No
	9. Name and Address of Curren	nt Registered Agent			10, Name and Address of New Registered A	gent
	JRRY, WILLIAM G		61	Name		
4210 SW 7TH AVE			82	Street Ac	Idress (P.O. Box Number is Not Acceptable)	
] GA	NNESVILLE FL 32607					
			83	3		
			84	City		85 Zip Code
					FL FL	[ ·
office or r agent. I a SIGNATURE	egistered agent, or both, in the State im familiar with, and accept the oblig Signature typed or printed name of registrategy.	ations of, Section 607.0505, FI	orida Statute	98.	orporation submits this statement for the purpose of cration's board of directors. I hereby accept the appo	intment as registered
12.	OFFICERS AN		13.	tece aldamana us	Quirted when reinstaling) DATI ADDITIONS/CHANGES TO OFFICERS AND I	DIRECTORS IN 12
TOTLE	P	DELETE	1.1 TITLE	T		Change Addition
NAME	MURRAY, WILLIAM G		1.2 NAME			
STREET ADDRESS	407 C STREET		13 STHEE	1 ADDRESS		
CITY-ST-ZIP	ST AUGUSTINE FL		1.4 CiTY-1			
TITLE		DELETE	21 THLE			Change Addition
NAME			2 2 NAME			
STREET ADDRESS			2 3 STREE	T ADDRESS		
CITY-ST-ZIP			2. 4 CITY	S1 - 21P		
TITLE		DELFTE	3.1 10116			Change Addition
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREE	1 ADDRESS		
CITY-ST-ZIP			3.4. CITY-	ST-ZIP	700 N OF 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
TITLE		☐ DELETE	4.1 TITLE		L	Change Addition
NAME			4. 2 NAME	1		
STREET ADDRESS			4.3 STREE	T ADDRESS		
CITY-ST-ZIP		T writt	4.4 CITY-5	\$1 - 7IP		Change T Addition
TITLE		☐ D€LETE	5 1 1ITLE		L	Change Addition
NAME			5.2 NAME			ĺ
STREET ADDRESS				T ADDRESS		
CITY-ST-ZIP	The second secon	☐ DELETE	5.4 CITY-5	ST-ZIP	· · · · · · · · · · · · · · · · · · ·	Change Addition
TITLE		☐ netere	6.1 TITLE		L	Change Addition
NAME			6.2 NAME			
STREET ADDRESS			■ 6.3 \$18£€1	I ADDRESS		

6.4 C(1Y+\$1-2IP 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