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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999

Principal Place of Business

ST AUGUSTINE FL 32804

407 C STREET

DOCUMENT # P94000054146

Mailing Address

3706 NW 43RD ST

GAINESVILLE FL 32606

INLAND SURF SHOP OF GAINESVILLE, INC.

21		Place of Business	2a. Mailing Address		4. FEI Number	Applied For	
Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc.	21		26		59-1713703	Not Applicable	
22 City & State Country Coun		. #, etc.	Suite, Apt. #, etc.		5 O Winds of Old or Desired	\$8.75 Additional	
City & State 28 City & State 28 City & State Country Registered Agent State City Country Registered Agent 81 Name MURRY, WILLIAM G 4210 SW 7TH AVE GAINESVILLE FL 32607 82 Street Address (P.O. Box Number is Not Acceptable) HOT C. S. I PECT Registered Agent 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 agent. I am familiar with, and accept the obligations of, Section 607,0505, Florida Statutes. SIGNATURE	22		27		5. Certificate of Status Desired	Fee Required	
Zip Country Zip Country 8. This corporation owes the current year Integrible Personal Property Tax. 9. Name and Address of Current Registered Agent MURRY, WILLIAM G 4210 SW 7TH AVE GAINESVILLE FL 32607 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) HO 7 C STREET 83 Zip Code 3280 Y 10. Name and Address of New Registered Agent 84 City T Augustive FL 85 Zip Code 3280 Y 17 Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits his statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE		te	City & State		6. Election Campaign Financing	\$5.00 May Be	
Zip Country Zip Country 25 29 30 Personal Property Tax. 9. Name and Address of Current Registered Agent MURRY, WILLIAM G 4210 SW 7TH AVE GAINESVILLE FL 32607 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) HOT C STREET 83 Zip Code 27 Augus Tive FL 85 Zip Code 37 So y 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits (his statement for the purpose of changing its 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	23		28		Trust Fund Contribution		
9. Name and Address of Current Registered Agent MURRY, WILLIAM G 4210 SW 7TH AVE GAINESVILLE FL 32607 82 Street Address (P.O. Box Number is Not Acceptable) 43 City 7 C STREET 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits his statement for the purpose of changing its 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.		Country	Zip	Country	8. This corporation owes the current year In	tangiple	
9. Name and Address of Current Registered Agent MURRY, WILLIAM G 4210 SW 7TH AVE GAINESVILLE FL 32607 82 Street Address (P.O. Box Number is Not Acceptable) 83 City THURE 10. Name and Address of New Registered Agent 84 City THURE 85 Zip Code 3 280 4 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 agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE	24	25	29	30	Personal Property Tax.	Yes □No	
MURRY, WILLIAM G 4210 SW 7TH AVE GAINESVILLE FL 32607 82 Street Address (P.O. Box Number is Not Acceptable) 43 City THURE 84 City THURE 85 Zip Code 3 2804 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 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	<u> </u>				10. Name and Address of New Registered	Agent	
4210 SW 7TH AVE GAINESVILLE FL 32607 82 Street Address (P.O. Box Number is Not Acceptable) 83							
GAINESVILLE FL 32607 83 City T Augus Time FL 85 Zip Code 3 280 4 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	MUF	rry, william g		92 Charat Addes	one (B.O. Roy Number in Not Accentable)		
GAINESVILLE FL 32607 83 84 City T Augus Tiwe FL 85 Zip Code 3 2-80 4 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	1			Street Addre	C STree T		
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits his 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	GAINESVILLE FL 32607			83		····	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits his 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	1						
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits his 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	ĺ			84 City - 7	- ALLOW TIME FI	85 Zip Code	
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.	44 Dussiani	to the provinces of Sections 607.06	502 and 607 1508 Elorida Statut	es the shove-named corno	pration submits his statement for the nurpose of	changing its registered	
agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.	dffice or	registered agent, or both, in the Stat	e of Florida. Such change was a	uthorized by the corporation	n's board of directors. I hereby accept the appo	intment as registered	
SIGNATURE Signature, boned or protect name of registered agent and title if applicable. (NOTE, Registered Agent signature required when reinstating) DATE	agent. I a	am familiar with, and accept the oblig	gations of, Section 607.0505, Flo	rida Statutes.		•	
Signature, typed or proted pame of registered agent and title if applicable. (NOTE, Registered Agent signature required when reinstaling)	SIGNATURE			5	DATE OATE		
12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	12				,	ND DIRECTORS IN 12	
					ADDITIONS OF A TOP OF THE COLUMN TO		
		ļ '					
INDITION OF THE PROPERTY OF							
STREET ADDRESS 407 C STREET 1.3 STREET ADDRESS ST. ALICUSTINE EL 3280 4	STREET ADDRESS					77824	
CITY-S1-ZIP ST AUGUSTINE FL		ST AUGUSTINE FL	E) BELETE				
	TITLE		☐ DEFE15			Citoliange Dividing	
NAME 22 NAME	NAME						
STREET ADDRESS 2.3 STREET ADDRESS 2.3 STREET ADDRESS	STREET ADDRESS	6		2.3 STREET ADDRESS			
CITY-ST-ZIP 2.4 CITY-ST-ZIP	CITY-ST-ZIP			2.4 CITY-ST-ZIP			
TITLE - 3.1 TITLE - 3.1 TITLE - Addition	TITLE		DELETE-	- 3.1 TITLE-		Change	
NAME 3.2 NAME	NAME			3.2 NAME			
STREET ADDRESS 3.3 STREET ADDRESS	STREET ADDRESS	3		3.3 STREET ADDRESS			
CITY-ST-ZIP 3.4 CITY-ST-ZIP	CITY-ST-ZIP			3.4. CITY-ST-ZIP			
TITLE DELETE 4.1 TITLE Change Addition			☐ DELETE			☐ Change ☐ Addition	
NAME 4.2 NAME	NAME			4. 2 NAME	•		
STREET ADDRESS 4.3 STREET ADDRESS	STREET ADDRESS	s		4.3 STREET ADDRESS			
CITY-ST-ZIP 4.4 CITY-ST-ZIP				9			
			☐ DELETE			☐ Change ☐ Addition	
NAME 5.2 NAME	}		_				
C 2 CTDETY ADDRESS	l			5.3 STREET ADDRESS			
STREET AUDICOS		?					
CITY-ST-ZIP	STREET ADDRESS			54 CITY-ST-ZIP			

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 attachyrent with appaddress, with all other like empowered. SIGNATURE:

NAME

STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

FILED

Mar 09, 1999 8:00 am Secretary of State

03-09-1999 90075 006 ***150.00

DO NOT WRITE IN THIS SPACE

3. Date incorporated or Qualifed

07/22/1994