


FILED
May 05, 1999 8:00 am
Secretary of State

05-05-1999 90220 012 ***150.00

PROFIT CORPORATION ANNUAL REPORT 1999		 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P94000065113 1. Corporation Name MARSHSIDE, INC.			
Principal Place of Business 10991-28 SAN JOSE BLVD JACKSONVILLE FL 32223 US		Mailing Address 8160 MERGANSER DRIVE PONTE VEDRA BEACH FL 32082	
2. Principal Place of Business		2a. Mailing Address	
21	26	3. Date Incorporated or Qualified 09/06/1994	
Suite, Apt. #, etc.		4. FEI Number 59-3270479	
22	27	Applied For Not Applicable	
City & State		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
23	28	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
24	29	8. This corporation owes the current year Intangible Personal Property Tax. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Country		30	
9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
SLAGLE, SUSAN 4190 BELFORT ROAD SUITE 240 JACKSONVILLE FL 32216		81 Name Edward W. Lane, III	
		82 Street Address (P.O. Box Number is Not Acceptable) 4190 Belfort Road	
		83 Suite 351	
		84 City Jacksonville	
		85 Zip Code FL 32216	
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 <i>Edward W. Lane, III</i>		DATE 5/20/99	
(NOTE: Registered Agent signature required when reinstating)			
12. OFFICERS AND DIRECTORS			
TITLE	D	<input type="checkbox"/> DELETE	
NAME	SLATTERY, MARY R		
STREET ADDRESS	8160 MERGANSER DRIVE		
CITY-ST-ZIP	PONTE VEDRA BEACH FL 32082		
TITLE	D	<input type="checkbox"/> DELETE	
NAME	SLATTERY, JOHN M		
STREET ADDRESS	8160 MERGANSER DRIVE		
CITY-ST-ZIP	PONTE VEDRA BEACH FL 32082		
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			
TITLE		<input type="checkbox"/> DELETE	
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
1.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
1.2 NAME			
1.3 STREET ADDRESS			
1.4 CITY-ST-ZIP			
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/29/99 904-268-5858
 Date Daytime Phone #

CR2E034 (11/98)