

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P94000070032 (5)

1. Corporation Name

SOUTHSIDE TROPICAL INVESTMENTS, INC.



Principal Place of Business

3790 MISTY WAY
DESTIN FL

Mailing Address

P.O. BOX 1495
DESTIN FL 32540

3. Date Incorporated or Qualified

09/22/1994

3a. Date of Last Report

11/29/1995

2. Principal Place of Business

2a. Mailing Address

21 81 Hidden Harbor Lane

26 P.O. Box 1495

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

27 City & State

23 Destin FL

28 Destin

24 Zip Country

29 32540 30 USA

4. FEI Number

59-3269444

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

10. Name and Address of New Registered Agent

Michael D. Smith
81 Hidden Harbor Lane
Destin, FL 32541

81 Name

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

83

84 City

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

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 NAME STREET ADDRESS CITY-ST-ZIP

DP SMITH, MICHAEL B 3790 MISTY WAY DESTIN FL 32541

TITLE NAME STREET ADDRESS CITY-ST-ZIP

DVS CLARK, CARL WAYNE 3790 MISTY WAY DESTIN FL 32541

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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE 12 NAME 13 STREET ADDRESS 14 CITY-ST-ZIP

2.1 TITLE 22 NAME 23 STREET ADDRESS 24 CITY-ST-ZIP

3.1 TITLE 32 NAME 33 STREET ADDRESS 34 CITY-ST-ZIP

4.1 TITLE 42 NAME 43 STREET ADDRESS 44 CITY-ST-ZIP

5.1 TITLE 52 NAME 53 STREET ADDRESS 54 CITY-ST-ZIP

6.1 TITLE 62 NAME 63 STREET ADDRESS 64 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

Michael Smith

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

April 21

Date

654-8545 904-830-5242

Daytime Phone #

CR2E034 (12/95)