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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000009011 (4)

EXTREME TAN, INC.

Principal Place of Business

2. Principal Place of Business

8128 FRONT BEACH RD STE D PANAMA CITY BEACH FL 32407 Mailing Address

2a. Mailing Address

8128 FRONT BEACH RD STE D

PANAMA CITY BEACH FL 32407

FILED Feb 26 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

 Date Incorporated or Qualified 01/31/1995

FEI Number

[21]	26		59-3293650	Not Applicable	
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip Country	7(0)	Country	8. This corporation owes or has paid the c		
	29 30	¬ '	Personal Property Tax due June 30.	☐ Yes ☐ No	
9. Name and Address of Current Re		<u> </u>	10. Name and Address of New Registerer		
SPIVEY, CHARLES P		81 Name			
8128 FRONT BEACH RD		_ _	60 C		
STE D		82 Street Address (P.O. Box Number is Not Acceptable)			
PANAMA CITY BEACH FL 32407		83	<u> </u>		
PANAMA CITT DEACH PL 32407					
		84 City	F	85 Zip Code	
11. Pursuant to the provisions of Sections 607.0502 an	id 607.1508, Florida Statutes,	the above-named cor	rporation submits this statement for the purpose	of changing its registered	
office or registered agent, or both, in the Statu of F agent. I am familiar with, and accept the obligation	is of, Section 607,0505, Floric	da Statutes.	sucres board or directors, i hereby accept the ap	pomunent as registered	
SIGNATURE		harles K	Spirey DIRECTOR ?	- 70-98	
Signature, typied or printed asine of regestered agent and	d brio Peppleable (NOTE R	logislored Agent e-gnature requ	DATE DATE		
12. OFFICERS AND DI		13.	ADDITIONS/CHANGES TO OFFICERS AN		
THTLE D	DELETE	1.1 TITLE		Change Addition	
NAME SPIVEY, CHARLES P		1.2 NAME			
STREET ADDRESS 556 LAGOON OAKS DR		1.3 STREET ADDRESS			
CITY-ST-ZIP PANAMA CITY BEACH FL 32408		1.4 CITY-ST-ZIP			
TITLE D	☐ DELFTE	21 TITLE		☐ Change ☐ Addition	
NAME SPIVEY, ALISA M		2.2 NAME			
STREET ADDRESS 556 LAGOON OAKS DR		2.3 STREET ADDRESS			
CITY-ST-ZIP PANAMA CITY BEACH FL 32408	}	2 4 CITY - ST - ZIP			
TITLE	☐ DELE1E	3.1 TITLE		Change Addition	
NAME		3.2 NAME			
STREET ADDRESS		3.3 STREET ADDRESS		•	
City-S1-ZiP		3 4. CITY-ST-ZIP			
TITLE	DELETE	4.1 TITLE		Change Addition	
NAME		4. 2 NAME			
STREET ADDRESS		4.3 STREET ADDRESS			
CITY-ST-ZIP		4 4 CITY-ST-ZIP			
TITLE	DELETE	5.1 TITLE		Change Addition	
NAME		5.2 NAME			
STREET ADDRESS		5.3 STREET ADDRESS			
CITY-ST-ZIP		5.4 CITY-ST-ZIP			
TITLE	DELETE	6.1 TITLE		Change Addition	
NAME		6.2 NAME			
STREET ADDRESS		6.3 STREET ADDRESS			
CITY-SI-ZIP		6.4 CITY · ST - ZIP			
14. I hereby certify that the information supplied with the	nis filing cloes not qualify for t		Section 119.07(3)(i), Florida Statutes. I further	certify that the information	

L I hereby certify that the information supplied with this filing closs not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the informatic indicated on this annual roport or supplicemental 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:

Wartes P. Spirey, Diceroe 7. 70 98 850 255-0350

HZE034 (10/97)

Applied For