

**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.  
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)**

PROFIT CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # **P95000016824 (1)**  
1. Corporation Name

**SOUTHSIDE ENTERPRISES, INC.**



Principal Place of Business

Mailing Address

~~904 LEE ROAD STE. 106  
LEHIGH ACRES FL 33970-1105~~

~~POST OFFICE BOX 1105  
LEHIGH ACRES FL 33970-1105~~

2. Principal Place of Business

2a. Mailing Address

21 **4105 3rd Street**

26 **4105 3rd Street West**

22 **West**

27

23 **Lehigh Acres, FL**

28 **Lehigh Acres, FL**

24 **33971**

Country

29 **33971**

30 Country

3. Date Incorporated or Qualified  
**02/27/1995**

3a. Date of Last Report  
**FIRST REPORT**

4. FFI Number  
**650570438**

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

**ELIZEE, BERNARD F  
904 LEE ROAD STE. 106  
LEHIGH ACRES FL 33970-1105**

10. Name and Address of New Registered Agent

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 **Bernard F. Elizee** **Bernard Felix Elizee**

(Signature typed or printed in block next to name of signing officer or director)

(NOTE: Registered Agent signature required when re-stating)

12. OFFICERS AND DIRECTORS  DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Change  Addition

TITLE **P, V**  DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**Bernard Felix Elizee  
4105, 3rd Street West  
Lehigh Acres, FL 33971**

1.1 TITLE  Change  Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

TITLE **S**  DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**Roweana Elizee  
4105 3rd Street West  
Lehigh Acres, FL 33971**

2.1 TITLE  Change  Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

TITLE  DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

3.1 TITLE  Change  Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

TITLE  DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

4.1 TITLE  Change  Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

TITLE  DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

5.1 TITLE  Change  Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

TITLE  DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

6.1 TITLE  Change  Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: **Bernard F. Elizee** **Bernard Felix Elizee** **July 26, 1996**

(Signature typed or printed in block next to name of signing officer or director)

CR2E034 (3/96)