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

SIGNATURE:

PROFIT . FLORIDA DEPARTMENT OF STATE FILED CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State 97 JUL 11 AM 14: 52 **DIVISION OF CORPORATIONS #997** SECRETATY OF STATE TALLAHASSEE, FLORIDA **DOCUMENT #** SEA GYPSY, INC. Principal Place of Business Mailing Address 1300 Main Street Post Office Box 6189 Ft. Myers Beach, FL Ft. Myers Beach, FL 3. Date Incorporated or Qualified 3a. Date of Last Report 33931 33932 6/17/95 2. Principal Place of Business 2a. Mailing Address 4. FELNumber Applied For 21 26 Not Applicable 65-0596790 Suite. Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional П Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 28 Trust Fund Contribution Added to Fees Zip Country Country 8. This corporation has liability for intangible tax under s. 199,032. 24 Yes No 25 29 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Flegistered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) JOEL C. ANDREWS 16060 Pebble Lane 83 Ft. Myers, FL 33912 84 Cily 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, or 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 familia with, and accept the objection 607.0505, Florida Statutes. SIGNATURE Registered Agent signature recurred when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 96/6) DELETE TITLE President 117/16 ☐ Change ☐ Addition NAME 1.2 NAME JOEL C. ANDREWS STREET ADDRESS 1.3 STREET ADDRESS 16060 Pebble Lane 800002239898-CITY-ST-ZIP 1.4 CITY - ST - ZIP Ft. Myers, FL 33912 <del>07/16/97---010**99**, -00</del>2, TITLE DELETE 2.1 TITLE Vice President \*\*\*\*750.00 \*\*\*\*750.00 NAME 2.2 NAME **DENNIS HENDERSON** STREET ADDRESS 2.3 STREET ADDRESS 5790 Briarcliff CITY-ST-ZIP 2 4 CITY - ST - ZIP <del>Ft. Myers, FL 33912</del> DELETE TITLE 31 TITLE Change ■ Addition SEC. -TREAS 3.2 NAME GEORGE GALA STREET ADDRESS 3.3 STREET ADDRESS 7227 Hendry Creek Drive CITY-ST-ZIP 3.4 C(1Y+S1+Z(P REINSTATEMENT\_9 Ft. MYers, FL 33908 DECETE TITLE 4 1 1171 E NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADORESS CITY-ST-ZIP 4 4 CITY - ST - ZIP OFFERE TITLE 5.1 TILLE NAME 5.2 NAME 400002197644 STREET ADDRESS 5.3 STREET ADDRESS -06/02/97--01079--002 CITY-ST-ZIP 5.4 CHY ST-ZIP \*\*\*1815.00 DELETE TITLE G 1 THILE G 2 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY - ST - 7iP CITY-ST-ZIP 14. I do hereby certify that the information supplied with this fifing 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 eath; 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.

3-31-97 941-765-1828