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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT # Corporation Name

P95000077963 (3)

HAMMER HEADS BY THE SEA, INC.

Principal Place of Business 1098 E. EAU GALLIE BLVD. SATELLITE BEACH FL 32937 Mailing Address

1098 E. EAU GALLIE BLVD. SATELLITE BEACH FL 32937



2. Principal Place of Business		2a. Mailing Addr	2a. Mailing Address			4, FEI Number		Applied For
า		26				59-3338720		Not Applicable
Suite, Apt. #, etc City & State		Suite, Apt. #. etc. 27 City & State 28				5. Certificate of Status Desired	\$8.75 Additional Fee Required	
						6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees		
Zip 4	Country 25	Ζ _[ρ	30 Co	intry		This corporation has liability for int Florida Statutes		under s. 199.032,
	g Name and Address of Cu	rrent Registered Agent		Τ		10. Name and Address of New Re-	gistered A	gent
				81 N	an e			
COONAN, ERIC R 1098 E. EAU GALLIE BLVD. SATELLITE BEACH FL 32937				82 Street Address (P.O. Box Number is Not Acceptable)				
				84 C	itv			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 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 hyper	tor portert cannot of registered a jest and title if according	Fisspetered Agent sugnitive to	
12.	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	DECETE	I 1 TiTu€	D/P Change X Addition
NAME		1.2 NAME	COONAN, ERIC R.
STREET ADDRESS		1.3 STREET ADDRESS	1098 E. EAU GALLIE BLVD.
CITY-SI-ZIP		1.4.0([Y+\$1+Z]P	SATELLITE BEACH, FL 32937
TITLE	☐ DELETE	2 1 7 11.6	D/T ☐ Change 🛣 Addition
NAME		2.2 NAME	FOSTER, RONALD J.
STREET ADDRESS		2.3 STREET ADDRESS	1098 E. ENU GALLIE BLVD.
CITY - ST - ZIP		24 CHY ST ZIP	SATELLITE BEACH, FL 32937
TITLE	DELETE	3 1 TOLE.	S Change X Add-tion
NAME		: 3.2 NAME	COONAN, D'EBORAH
STREET ADDRESS		3.3 STREET ADDRESS	1098 E. EAU GALLIE BLVD.
CITY-ST-ZIP		3.4 CHY ST-ZIP	SATELLITE BEACH, FL 32937
THTLE	□ DECETE	4 1 11718	Change Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 City - SF-ZiP	
TULE	DELETE	5 1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAM ^e	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CiTY - \$1 - 7iP	
TITLE	☐ DELETE	6 1 TITLE	Change Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY ST. 7IF		6.4 CHY - ST - ZIF	

14. If 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 supplier ental annual report is true and accurate and that my signature shall have the same legal effect as if made under early; 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: RONALI RONALI SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR RONALD J. FOSTER

(407) 773-2948

CR2E034 (12/95)