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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

1	1997	# # 77	ORPORATIONS	97 APR 30	PM 3: 42
DOCUMENT # P9500094250 (4) SWEETBAY DEVELOPMENT CORPORATION				SECRETARY OF STATE TALLAHASSEE, FLORIDA	
Principal Place of Business Mailing Address 2632 NEUCHATEL DRIVE TALLAHASSEE FL 32303 TALLAHASSEE FL 32303-22			1253		
				3. Date Incorporated or Qualified 01/01/1998	3a. Date of Last Report
2. Principal Pl	ace of Business	2a. Mailing Address		4. FEI Number	Applied For
21	H. ote.	26 Cuito Ant # ata			Not Applicable
Suite, Apt	#, QIO	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	9	City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be
Ζιρ 24	Country 25	Zip 29	Country 30	This corporation has liability for intal Florida Statutes	es No
	9. Name and Address of Curr	ent Registered Agent	81 Name	10. Name and Address of New Regist	tered Agent
DENNIS, JAMES M 2632 NEUCHATEL DRIVE					***************************************
TALLAHASSEE FL 32303			82 Street Ad	idress (P.O. Box Number is Not Acceptable)	
,, ,,,			83		***************************************
			84 City		85 Zip Code
		, p.			FL `\
SIGNATURE	Superior typed or product name of registered.	agent and the it applicable (NOT	Flegistered Agent signature re		DATE
12. 1016	OFFICERS A	ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICER	Change Addition
NAME	DENNIS, JAMES M		1.2 NAME		
STREET AFERESS	2632 NEUCHATEL DRIVE		1.3 STREET ADDRESS		
CHY \$1-2ii:	TALLAHASSEE FL 32303		1.4 City-SY-ZIP	4000021	67344-3 7-01069*-019ddition
1-fLf		☐ DELETE	2 1 TITLE	-05/06/9	701069*-019ddllor
NAME STREET ADDRESS			22 NAME 2.3 STREET ADDRESS	東半年100、	.00 ****165.00
CITY - ST - ZIP			2. 4 CITY-ST-ZIP		
III.E		DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CHY-SL-ZIP		☐ DELETE	3.4. CITY-ST-ZIP		Change Addition
MAME		□ DCCC1£	4.1 TITLE 4.2 NAME		El orange El vanion
STEEL ADDRESS			4.3 STREET ADDRESS		
OUTY-ST ZIP			4.4 CITY - ST - ZIP		
Titel	And the second s	☐ DELETE	51 TITLE		Change Addition
NAME			5.2 NAME	t	
STREET ADDRESS			5.3 STREET ADDRESS	•	
CHY SE-72	,	DELETE	5.4 CITY+ST-ZIP 6.1 TITLE		Change Addition
NAME		hand between the	6.2 NAME	^	d
STREET ADDRESS			6.3 STREET ADDRESS	NL1	21 11
CiTY - S1 - 710			6.4 CITY - ST - ZiP		1 10-41
14. I do herel	by certify that the information supp	lied with this filing does not quali	ly for the exemption sta	ted 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 or fam 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 withjan address.

SIGNATURE: