FILE NOW: FILING FEE AFTER MAY 1 IS \$550.01

PROFIT ORPORATION NUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

OCUMENT # P9600008886 (9)

EDGEWATER SUN SPOT REALTY, INC.

Principal Plac	e of Business	Mailing Address			
11214A FRONT BEACH RD. PANAMA CITY BEACH FL 82407		11214A FRONT BEACH RD. PANAMA CITY BEACH FL 32407-3603			
- CANADA VIII	DENOTITE GRADI	PRIMITAL DENGITE D	2407-3000		Date of Last Report
2 Principal F	Place of Business	2a. Mailing Address		01/25/1996 4. FEI Number	Anding For
21		26		59-3170358	Applied For Not Applicable
Sulte, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
City & State		City & State			Fee Required
23	e	26 City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for intangit	ole tax under s. 199.032,
24	25 9. Name and Address of Curren		10	Florida Statutes Yes 10. Name and Address of New Registere	
A/A	THIEU, WILLIAM	t neglistered Agent	81 Name	10. Name and Address of New Registere	n Walk
11214A FRONT BEACH RD.			B2 Street Addr	ess (P.O. Box Number is Not Acceptable)	
	NAMA CITY BEACH FL 32407				
			83		
			84 City	F	85 Zip Code
11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508, Florida Statutes	, the above-named corp	oration submits this statement for the purpose on's board of directors. I hereby accept the appropriate the statement of the purpose on the statement of the st	of changing its registered
agent. I a	am familiar with, and accept the obliga	ations of, Section 607.0505, Flori	da Statutes.	on's board or directors, i hereby accept the ap	ppointment as registered
SIGNATURE	Signature, typed or printed name of registered age	of and title (armicable (NOIE)	Registered Agent signature require	ed when renstaling) DATE	THE R. P. LEWIS CO., LANSING MICH. LANSING STREET, LANSING STR
12.	OFFICERS ANI		13.	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
TITLE	DIPVES MANY	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	savelle, mary	0.0	1.2 NAME		
STREET ADDRESS	BERVA Front Beh	E FL 224 M	1.3 STREET ADDRESS	<i>'</i>	
CITY-ST-ZIP TITLE	DISIT	DELETE	1.4 City-ST-ZIP 2.1 Title		Change Addition
NAME	mathieu, Jane 315 Hitlerus		2.2 NAME >		·
STREET ADDRESS	315 Hitlecur	ave,	2.3 STREET ADDRESS	r.	
CITY-ST-ZIP	Parana (ity Och	- PL 324/3	2.4 CITY - S1 - ZIP		
TITLE NAME		☐ DELETE	3.1 TITLE 3.2 NAME		Change Addition
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY - ST - ZIP		
TITLE		DELETE	4.1 THTLE		Change Addition
NAME	J		4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP		DELETE	4.4 CITY - ST - ZIP		Change Addition
TITLE NAME			5.1 TITLE 5.2 NAME		Jacobs L Addition
STREET ADDRESS			5.3 STREET ADDRESS		5/28/95
CITY-ST-ZIP			5.4 CITY - ST - ZIP	TT.	19-9/14
TITLE		☐ DELETE	6.1 TITLE	00	Change Addition
NAME	I		II cananc		

14. I do hereby certify that the information supplied with this filing 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 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.

CIGNIATURE.

STREET ADDRESS

FILED
May 28 1997 8:00am
Secretary of State