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FILED  
May 11 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



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

DOCUMENT # P96000015428 (1)

1. Corporation Name  
BAREFOOT TRACE RENTALS, INC.



Principal Place of Business

Mailing Address

6240 A1A SOUTH  
ST AUGUSTINE FL 32084

6240 A1A SOUTH  
ST AUGUSTINE FL 32084

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip Country

Zip Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

COX, ASA  
6240 A1A SOUTH  
ST AUGUSTINE FL 32084

81 Name

John R. Geiger

82 Street Address (P.O. Box Number is Not Acceptable)

4475 US 10 South #406

83

84 City

St Augustine

FL

85 Zip Code

32086

11. Pursuant to the provisions of Sections 607.0102 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, as 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, printed name of registered agent, limited to 40 characters

(NOTE: Registered Agent signature required when stating)

4/28/98

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

NAME COX, ASA  
STREET ADDRESS 6240 A1A SOUTH #407  
CITY-ST-ZIP ST AUGUSTINE FL

TITLE ☒ DELETE

NAME MERGENOVICH, AGATHA  
STREET ADDRESS 6240 A1A SOUTH #301  
CITY-ST-ZIP ST AUGUSTINE FL

TITLE ☒ DELETE

NAME BURCHFIELD, MARYLIN  
STREET ADDRESS 6240 A1A SOUTH #109  
CITY-ST-ZIP ST AUGUSTINE FL

TITLE ☐ DELETE

NAME FERRELL, KAYDA  
STREET ADDRESS 6240 A1A SOUTH #105  
CITY-ST-ZIP ST AUGUSTINE FL

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

11 TITLE

12 NAME

13 STREET ADDRESS

14 CITY-ST-ZIP

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY-ST-ZIP

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY-ST-ZIP

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY-ST-ZIP

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY-ST-ZIP

61 TITLE

62 NAME

63 STREET ADDRESS

64 CITY-ST-ZIP

D XAVIER VERBOCK  
6240 A1A SOUTH #311  
St. Augustine, FL 32084

S MARY CHANEY  
6240 A1A SOUTH #202  
ST. AUGUSTINE, FL 32084  
VICE PRESIDENT

Ferrell Kayda  
6240 A1A SOUTH #105  
St. Augustine, FL 32084

14. I 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, unchanged, or on an attachment with an address.

CR2E034 (10/97)