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

PROFIT CORPORATION **ANNUAL REPORT**

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9600026700 (0)

MEXICO BEACH MARINA, INC.

FILED 97 AUG -5 AM 10: 59 CACCHETART OF STATE TALLAHASSEE, FLORIDA



Principal Plac	se of Business	Mailing Address	Mailing Address			a tomttade til iblin attit aner antit anitt antit lifte feitt iblit bitt fill bitt
102 MIRAMAR MEXICO BEACI		102 MIRAMAR DR MEXICO BEACH FL 32410				
						3. Date Incorporated or Qualified 3a. Date of Last Report 03/20/1996
2. Principal P	Place of Business	2a. Mailing Address	. Mailing Address			4. FEI Number Applied For
21		26				59-3371700 Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				¢0 75 4 100 -1
22		27				5. Certificate of Status Desired Fee Required
City & State		City & State				6. Election Campaign Financing \$5.00 May Be
23		28				Trust Fund Contribution
Zip	Country	Zip	Cou	ntry		8. This corporation has liability for intangible tax under s. 199.032,
24	25	29	30			Floride Statutes Yes No
	9. Name and Address of Curr	ent Registered Agent				10. Name and Address of New Registered Agent
HUT	CHI SO N, EDWARD A JR			81	Name	
221 MCKENZIE AVE				82	Ctroot Addes	ess (P.O. Box Number is Not Acceptable)
	AMA CITY FL 32401			62	Street Addre	ESS (F.O. DOX NUMBER IS NOT ACCEDIADIB)
			•	83		A
			•	84	City	FL 85 Zip Code
11. Pursuant office or ragent ha	to the provisions of Sections 607.05 registered agent, or both, in the Staum familiar with, and accept the obli	02 and 607.1508, Florida State of Florida. Such change wa gations of, Section 607.0505,	tutes, the ab is authorized Florida Stati	pove d by utes.	named corpo the corporatio	oration submits this statement for the purpose of changing its registered on's board of directors. I hereby accept the appointment as registered
SIGNATURE	Signature, lyried or printed name of registered a	geot and title if applicable (N	IOTE: Registered	1 Agen	it signature require:	ed when reinstating) DATE
12.	OFFICERS A	ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	DELETE	1.1 113	LE		Change Addition
NAME	BARWICK, BILLIE J JR		1.2 NA	ME	i	
STREET ADDRESS	102 MIRAMAR DR		1.3 ST	REET A	ADDRESS	~~~~~~~~~~ <u>~~~</u>
CITY-ST-ZIP	MEXICO BEACH FL 32410		1.4 00	TY-ST	- ZIP	3000022623230
TITLE		DELETE	21][[21 TITLE		9000022629290 -08/11/9701056012 ****330.00 *****165.00***
NAME			2.2 NA	ME	1	**************************************
STREET ADDRESS			23 ST	REET A	ADDRESS	
CITY-ST-ZIP			2 4 CI	IIY-SI	i - ZIP	
TITLE		☐ DELETE	3 1 TIT			Change Addition
NAME			3 2 NA	ME	ŀ	
STREET ADDRESS			3.3 ST	REFT A	ADDRESS	
CITY-ST-ZIP			3.4. CI	TY-ST	- ZIP	
TITLE		DELETE	4.1 TiT		1 1	Change Addition
NAME			4. 2 NA	AME		
STREET ADDRESS			3		address	
CITY-ST-ZIP			4.4 CIT			
TITLE	<u> </u>	DELETE	5.1 TIT			☐ Change ☐ Addition
NAME		****	5.2 NA			
STREET ADDRESS					ADDRESS	\
CITY-ST-ZIP						Λ «\β
TITLE	,,,,, <u>,</u>	DELETE	5.4 CIT 6.1 TIT		.511.	Change Addition
NAME			6.2 NA			Ch . Describe T Maritan
					DDDC00	*
STREET ADDRESS			6.3 \$11	KEET A	ADDRESS	

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 of the receiver or trustee empowered be execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changely or an an attachment with an address