

59-97 B-6760 C
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 # P96000043785 (0)

1. Corporation Name
A. TIKI TOUCH, INC.

Principal Place of Business
8220 BUCHANAN ROAD
PANAMA CITY BEACH FL 32413

Mailing Address
8220 BUCHANAN ROAD
PANAMA CITY BEACH FL 32413-9539



3. Date Incorporated or Qualified 05/16/1996	3a. Date of Last Report
4. FEI Number 59-3382324	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No	
10. Name and Address of New Registered Agent	

2. Principal Place of Business 21 8220 Buchanan Rd. Suite, Apt. #, etc. 22 City & State Panama City Beach 23 Zip 32413 Country USA 24 32413 25 BAY 26 8220 Buchanan Rd. Suite, Apt. #, etc. 27 City & State Panama City Beach 28 Zip 32413 Country USA 29 32413 30 BAY	9. Name and Address of Current Registered Agent GRIFFIN, STACY Anne 8220 BUCHANAN ROAD PANAMA CITY BEACH FL 32413
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81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
FL 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 office or 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: Stacy Anne Griffin DATE: 3/1/97
Signature of registered agent and filer of application (NOTE: Registered Agent signature is required when registering)

12. OFFICERS AND DIRECTORS	
TITLE	President
NAME	Stacy Anne Griffin
STREET ADDRESS	8220 Buchanan Road
CITY-ST-ZIP	Panama City Beach FL 32413
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

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.

SIGNATURE: Stacy Anne Griffin DATE: 3/1/97

CR2E034 (9/96)