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

CORPORATION \*# ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT # P96000050449 (3)

SEASIDE STUDIO, INC.

| Principal Place                         | e of Business                                    | Mailing Address                     |  |               | A I CANONE IND NAME WITH BOTH CONT. COLUMN CONTRACTION OF THE COLUMN CONTRACT. |                              |
|---|--|-------------------------------------|--|---------------|--|------------------------------|
| 132 ORANGE ST<br>NEPTUNE BEACH FL 32266 |  | 132 orange St<br>Neptune Beach FL 3 | 132 ORANGE ST<br>NEPTUNE BEACH FL 32266-6154 |               |  |                              |
|   |  |                                     |  |               | 3. Date incorporated or Qualified 34 06/11/1996                                | Date of Last Report          |
| 2. Principa' Pi                         | ace of Business                                  | 2e. Mailing Address                 |  |               | 4. FEI Number 59-342 4491  | Applied For Not Applicab     |
| Suite, Apt                              | #, etc.  | Suite, Apt #, etc.                  |  |               | 5. Certificate of Status Desired   | 60 7E                        |
| City & State                            | · · · · · · · · · · · · · · · · · · ·            | City & State                        | 100  |               | Election Campaign Financing     Trust Fund Contribution                        | <b>\$5.00</b> May Be         |
| Zip                                     | Country  | Zip                                 | Country                                      | ,             | 8. This corporation has liability for intan-                                   | gible tax under s. 199.032,  |
| 4                                       | 9. Name and Address of Cur                       | 29                                  | 30   |               | Florida Statutes Yes  10. Name and Address of New Register                     | s No                         |
| CI B                                    |  | terit negistered Agent              | 81   | Name          | TO. Name and Address of New Auguste  | леа Адені                    |
| SULIK, JOHN J<br>320 E ADAMS ST         |  |                                     | -  |               | And the CO O D. North of Made and the  |                              |
|   | KSONVILLE FL 32202                               |                                     | 82   | Street        | Address (P.O. Box Number is Not Acceptable)                                    |                              |
|   |  |                                     | 63   | _             |  |                              |
|   |  |                                     | 84   | City          |  | FL 85 Zip Code               |
| SIGNATURE                               | Sterlatur, Poperkor per test comic of registers: | agent and title if applicable IN    | OTF: Registered Ag                           | ent signature | e required when reinstating)  ADDITIONS/CHANGES TO OFFICERS                    | ATE<br>S AND DIRECTORS IN 12 |
| iki                                     | D  | DELETE                              | 1.1 TITLE                                    |               | PRESIDENT  | Change Addit                 |
| AME                                     | GRANDY, MARY                                     |                                     | 1.2 NAME                                     |               |  | , ,                          |
| TREET ADDRESS                           | 132 ORANGE ST                                    | _                                   | 1.3 STREET                                   | ADDRESS       |  |                              |
| ITY-S1 7/P                              | NEPTUNE BEACH FL 3226                            |                                     | 1.4 CITY-1                                   | T-71P         |  |                              |
| III F                                   | d<br>Hjelm, sandra                               | X DELETE                            | 2.1 TITLE                                    |               | VICE PRESIDENT<br>NANCY BANKS  | Change Addi                  |
| AME<br>Ereet address                    | 132 ORANGE ST                                    |                                     | 2.2 NAME                                     | ADDRESS       | 132 ORANGE ST  |                              |
| TY-SEZIP                                | NEPTUNE BEACH FL 3226                            | 6                                   | 2.3 SINEE<br>2.4 CITY-                       |               | NEPTUNE BEACH, 1-L 3226  | , <b>k</b>                   |
| itt                                     | D  | DELETE                              | 3 1 TITLE                                    | <u> </u>      | TREASURER  | Change Add                   |
| awe                                     | NICHOLAS, TERRY                                  |                                     | 3 2 NAME                                     |               | 100,100,000  |                              |
| TREET ADDRESS                           | 132 ORANGE ST                                    | •                                   | 3 3 STREE                                    | ADDRESS       |  |                              |
| TY - \$1 - ZIP                          | NEPTUNE BEACH FL 3226                            | DELETE                              | 3.4. CHY-                                    | ST-ZIP        | 4660000 13V  | Change Addi                  |
| ITLE<br>AVE                             |  | [] been                             | 4.1 TITLE<br>4. 2 NAME                       |               | CAROUNE FORBIS   | AT cualifie (Vari            |
| "REEL ADDRESS                           |  |                                     |  | ADDRESS       | 132 ORANGE ST.   |                              |
| r* si ze - ]                            |  |                                     | 4.4 CITY -                                   |               | NEDTUNE BUACH, FL 3226   | 6                            |
| TLF .                                   |  | DELETE                              | 5.1 TITLE                                    |               |  | Change Addi                  |
| AME                                     |  |                                     | 5.2 NAME                                     |               |  |                              |
| SPREET ALIDRESS                         |  |                                     | 5.3 STREE                                    | 223RDCA       |  |                              |
| 011Y - 81 - Z0°                         |  |                                     | 5 4 CITY-                                    | ST - ZIP      |  | <b>—</b>                     |
| THTLE                                   |  | DELETE                              | 61 TITLE                                     |               |  | Change Addit                 |
| RINKS I                                 |  |                                     | ■ Ed Phyrac                                  |               | 1  |                              |

6.3 STREET ADDRESS

14. If do hereby certify that the information supplied with this filling 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 ceptor 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

SIGNATURE:

information indicated on this annus Farir an officer or director of the co appears in Block 12 or Block 11 if

SIREL LADORESS

**FILED** 

Apr 09 1997 8:00am

Secretary of State