

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Feb 24, 1999 8:00 am
Secretary of State

02-24-1999 90038 037 ***150.00

DOCUMENT # P96000050449

1. Corporation Name

SEASIDE STUDIO, INC.

Principal Place of Business

407 ATLANTIC BLVD
ATLANTIC BEACH FL 32233
US

Mailing Address

407 ATLANTIC BLVD
ATLANTIC BEACH FL 32233
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/11/1996

4. FEI Number

59-3424491

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 owes the current year Intangible
Personal Property Tax. ☐ Yes ☒ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

28 City & State

29 Zip

Country

9. Name and Address of Current Registered Agent

O'CONNOR, AILISH
4811 BEACH BLVD #200
JACKSONVILLE FL 32207

10. Name and Address of New Registered Agent

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS ☐ DELETE

TITLE P
NAME GRANDY, MARY
STREET ADDRESS 407 ATLANTIC BLVD
CITY-ST-ZIP ATLANTIC BEACH FL 32233

TITLE VP
NAME NEIBAUR, MERCEDES
STREET ADDRESS 407 ATLANTIC BLVD
CITY-ST-ZIP ATLANTIC BEACH FL 32233

TITLE T
NAME NICHOLAS, TERRY
STREET ADDRESS 407 ATLANTIC BLVD
CITY-ST-ZIP ATLANTIC BEACH FL 32233

TITLE S
NAME FORBIS, CAROLINE
STREET ADDRESS 407 ATLANTIC BLVD
CITY-ST-ZIP ATLANTIC BEACH FL 32233

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 ☐ Change ☒ Addition

1.1 TITLE S
1.2 NAME Knabel, Jackie
1.3 STREET ADDRESS 25588 Hwy 301 N.
1.4 CITY-ST-ZIP Lawtey, FL 32054

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE T
4.2 NAME Forbis, Caroline
4.3 STREET ADDRESS 1977 San Juan Dr.
4.4 CITY-ST-ZIP Ponte Vedra Beach, FL 32082

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jackie Knabel

Date

1/07/99

Daytime Phone #

904-782-1028

CR2E034 (11/18)