

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P96000056904 (1)
1. Corporation Name
THE SOUTHPORT GROUP OF NORTH FLORIDA, INC.

Principal Place of Business
3803 PRESERVE COURT #14-308
TAMPA FL 33624

Mailing Address
3803 PRESERVE COURT #14-308
TAMPA FL 33624

3402 Waterbridge dr.

2. Principal Place of Business

21

2a. Mailing Address

26

same

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 Tampa FL

27

City & State

City & State

23

28

Zip

33618

Country

USA

29

Zip

Country

30

9. Name and Address of Current Registered Agent

FURNARI, MICHAEL A
3803 PRESERVE COURT #14-308
TAMPA FL 33624

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/02/1996

3a. Date of Last Report

4. FEI Number

59-3402361

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

10. Name and Address of New Registered Agent

81 Name

same

82

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

83

84 City

FL

85

Zip Code

11. Pursuant to the provisions of Sections 607.0509 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's signature required when reinstating)

7/19/97

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME P
FURNARI, MICHAEL A
STREET ADDRESS 3803 PRESERVE COURT #14-308
CITY-ST-ZIP TAMPA FL 33624

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
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TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

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

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

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

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

600002256286-6

-08/04/97-04089-095

****165.00 ****165.00

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.

FILED

97 JUL 25 AM 10:29

SECRETARY OF STATE
TALLAHASSEE FLORIDA



CR2E034 (4/97)

Per. Carol in your office, 2-2
I have enclosed a check for
\$165 (I never received the 1st
notice). Also, I have filled the
form out w/ our new address
(3402 Waterbridge Dr.) as we will
be moving next week. Please
call w/ any questions.

Thomas
Mike

memo from

MICHAEL FURNARI