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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

FILED May 11 1998 8:00am Secretary of State

	RAY BEACH SUPPLY							
	Principal Place of Business Mailing Address							14481 1141 1411
14828 FRONT BEACH ROAD 14828 FRONT BEACH RO PANAMA CITY BEACH FL PANAMA CITY BEACH FI								
PARAMA CIT	I DENON FL	PANAMA OI	I BEAUTI FL			DO NOT WRITI	E IN THIS SPACE	
						3. Date Incorporated or Qualified		
						01/23/1997		
	lace of Business	2a. Mailing A	ddress			4. FEI Number		Applied For
21		26						Not Applicable
Suite, Apt.	#, 01 C.		Suite, Apt #, etc.			5. Certificate of Status Desired		Additional Regulred
City & Stat			City & State			6 Flatia Omnaia Flatia		
23	U .	28	-			6. Election Campaign Financing Trust Fund Contribution		O May Be d to Fees
Zip	Country	7ip		Country				
24	25		30			8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No		
		29 of Current Registered Age				10. Name and Address of New Ro		
HE	SS, BRIAN D			81	Name		-	
	08 FRONT BEACH ROA	D		82	Street Addi	ress (P.O. Box Number is Not Accepta	ble)	
PA	NAMA CITY BEACH FL	32407						
				83				
				84	City		85 Zi	p Code
					•			
office or r agent. i a	to the provisions of Section egistered agent, or both, if in familiar with, and accept	is 607.0502 and 607.1508, Fi i the State of Florida. Such of I the obligations of, Section 6	orida Statutes, tr nange was autho 07.0505, Florida	ne above- orized by t . Statutes.	named corp he corporal	poration submits this statement for the ion's board of directors. I hereby acce	purpose or chariging pt the appointment a	as registered
		registernd agent and title t' applicable			agnature requi	red when reinstating)	DATE	
12.	O(1)	CERS AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFI		
TITLE	D DELETÉ POOLE, THOMAS R		1	1,1 TITLE			Change	Addition
NAME Street address	14828 FRONT BEAC	H BUYD	1.2 NAME 1.3 Street Andress					
CITY-ST-ZIP	PANAMA CITY BEAC							
TITLE -	D			2.1 TILE	ZIF		Change	Addition
NAME	POOLE, THOMAS C			2.2 NAME				, , , , , , , , , , , , , , , , , , ,
STREET ADDRESS	4444 50010 551011 5610			2.3 STREET ADDRESS				•
CITY-ST-ZIP	PANAMA CITY BEAC		1	2. 4 CITY-ST-	- i			
TITLE	0			3.1 TITLE			☐ Change	Addition
NAME				3.2 NAME				
STREET ADDRESS 14828 FRONT BEACH ROAD				3.3 STREET A	ODRESS]
CITY-ST-ZIP	PANAMA CITY BEAC	H FL 32413	<u></u>	3.4. CITY-S1-	ZIP			
TITLE			DELETE	4.1 THILE			Change	Addition
NAME			J.	4. 2 NAME				
STREET ADDRESS				4.3 STREET AL	DORESS			
CITY-ST-ZIP				4.4 CITY-ST-	ZIP			
TITLE			DELETE	5 1 TITLE	[_	· · · · · · · · · · · · · · · · · · ·	☐ Change	Addition
NAME			i :	5.2 NAME				
STREET ADDRESS			1	5.3 STREFT AL	DORESS			
CITY-ST-ZIP				5.4 CITY - ST-	ZIP			
TITLE				6.1 THEF	1		Change	Addition
NAME				6.2 NAME				
STREET ADDRESS			.	6.3 STREET AL	DRESS			
CITY-ST-ZIP				6.4 CITY-ST-	ZIP			

Thereby 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.