## 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 # P97000013759 (0)

EBBTIDE INVESTMENTS, INC.

Principal Place of Business

Mailing Address

## **FILED** Jul 22 1998 8:00am Secretary of State



1\$1 ELDREDGE ROAD FT. WALTON BEACH FL 32548		151 ELDREDGE ROAD FT. WALTON BEACH FL 32548			DO NOT WRITE IN THIS  3. Date incorporated or Qualified	DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified		
					02/12/1997			
2. Principal P	ace of Business	2a. Mailing Address	Mailing Address		4. FEI Number	Applied For		
21		26			59 3485516	Not Applica		
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional			
22		27				Fee Required		
City & State		City & State			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
Zip	Country	Zip	Country	/	8. This corporation owes or has paid the cu			
24	25	29	30			Yes No		
	9. Name and Address of Curre	ont Registered Agent	81	Name	10. Name and Address of New Registered	Agent		
SAXER, CHRISTOPHER P ESQ.			°'	Name				
25 WALTER MARTIN ROAD, N.E. FT. WALTON BEACH FL 32548			82	Street Address (P.O. Box Number is Not Acceptable)				
11.	TIPETON DENOTE I E 02040		83	ļ		<u> </u>		
			84	City		85 Zip Code		
	· · · · · · · · · · · · · · · · · · ·			<u> </u>	FL	•     `		
office or ri	lo <b>the</b> provisions of Sections 607.03 eg <b>iste</b> red agent, or both, in the Stat m <b>fa</b> miliar with, and accept the obli	e of Florida. Such change was	authorized b	v the con	corporation submits this statement for the purpose operation's board of directors. I hereby accept the appropriate the control of the control	or changing its registered pointment as registered		
SIGNATURE	Signature, typed or printed name of registered to	pent and title it applicable (NO	IF: Booklered An	ent signal re	required when reinstating) DATE			
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTORS IN 12		
TITLE	D	DELETE	1.1 THTLE			☐ Change ☐ Addil		
NAME	LOYLESS, P. EDWARD	<i>/</i>	1.2 NAME					
STREET ADDRESS	151 ELDREDGE ROAD		1.3 STREE	ADDRESS		,		
CITY-ST-ZIP	FT. WALTON BEACH FL 325	548	1.4 CITY - 3	ST-ZIP				
TITLE	D	☐ DELETE	2.1 TITLE		D	change		
NAME	DENMANS, E. BARRY		2.2 NAME		DENMAN, E. BARRY 801 KELL-AIRE DRI DESTIN, FL 32541	' a		
STREET ADDRESS	451 ELDREDGE ROAD	• • •	2.3 STREE	ADDRESS	801 KELL-AIRE DRI	VB		
CITY-ST-ZIP	FT. WALTON BEACH FL 32		2. 4 CITY-	ST-ZIP	DESTIN, FL 32541			
TITLE	DOWED BUILDED A	☐ DELETE	3.1 TITLE			☐ Change ☐ Addit		
NAME	DRIVER, BUFORD A 151 ELDREDGE ROAD		3.2 NAME					
STREET ADDRESS	FT. WALTON BEACH FL 325	SAR	3.3 STREE					
CITY-ST-ZIP	TI. WALION DENOIT IL 320	DELETE	3.4. CITY-	ST-Z⊮P		Change Addit		
TITLE NAME		ב_ מנננונ	4.1 TITLE 4. 2 NAME		·	L Onange LJ About		
STREET ADDRESS		•		ADDRESS				
CITY-ST-ZIP	•		4.4 CITY - 5					
TITLE		DELETE	5.1 TITLE	EII		Change Addit		
NAME			5.2 NAME					
STREET ADDRESS		•	5.3 STREE	ADDRESS				
CITY-ST-ZIP			5.4 CITY-					
TITLE		☐ DELETE	6.1 TITLE			☐ Change ☐ Addit		
NAME			6.2 NAME					
STREET ADDRESS			6.3 STREE	ADDRESS				
CITY-ST-ZIP			6.4 CITY-5	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.

- 1.210 -