

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

FILED
Apr 22 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P97000047625 (3)

1. Corporation Name

FINECEY ISLAND ENTERPRISES, INC.



Principal Place of Business	Mailing Address
1805 MAIN STREET SUITE 1001 SARASOTA FL 34236	1805 MAIN STREET SUITE 1001 SARASOTA FL 34236

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 Cool-licious		26 Cool-licious		05/29/1997	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number	
22 5057 OCEAN BLVD		27 5057 OCEAN BLVD.		65-0759608	
City & State		City & State		Applied For	
23 SARASOTA FL.		28 SARASOTA FL		Not Applicable	
Zip		Zip		5. Certificate of Status Desired	
24 34242		29 34242		<input type="checkbox"/> \$8.75 Additional Fee Required	
Country		Country		6. Election Campaign Financing	
				<input type="checkbox"/> \$5.00 May Be Added to Fees	
				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.	
				<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
GOLDSMITH, STANLEY A 1805 MAIN STREET SUITE 1001 SARASOTA FL 34236				81 Name KELLY FINECEY-SIMMS			
				82 Street Address (P.O. Box Number is Not Acceptable) 5057 OCEAN BLVD			
				83			
				84 City SARASOTA FL 85 Zip Code 34242			

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 *Kelly Finecey-Simms* Kelly Finecey-Simms-President March 10, 1998
Signature, type or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	D	<input type="checkbox"/> DELETE		1.1 TITLE	DP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	FINECEY-SIMMS, KELLY			1.2 NAME	FINECEY-SIMMS, KELLY		
STREET ADDRESS	2570 10TH ST APT 202			1.3 STREET ADDRESS	(address unchanged)		
CITY-ST-ZIP	SARASOTA FL 34237			1.4 CITY-ST-ZIP			
TITLE	D	<input type="checkbox"/> DELETE		2.1 TITLE	DAT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	SIMMS, GLENN S			2.2 NAME	FINECEY, GLENN S.		
STREET ADDRESS	2570 10TH ST APT 202			2.3 STREET ADDRESS	(address unchanged)		
CITY-ST-ZIP	SARASOTA FL 34237			2.4 CITY-ST-ZIP			
TITLE	D	<input type="checkbox"/> DELETE		3.1 TITLE	DVP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	FINECEY, RAYMOND H			3.2 NAME	FINECEY, RAYMOND H.		
STREET ADDRESS	305 QUAIL DRIVE			3.3 STREET ADDRESS	(address unchanged)		
CITY-ST-ZIP	SYKESVILLE MD 21784			3.4 CITY-ST-ZIP			
TITLE	D	<input type="checkbox"/> DELETE		4.1 TITLE	DS	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	FINECEY, BARBARA A			4.2 NAME	FINECEY, BARBARA A.		
STREET ADDRESS	305 QUAIL DRIVE			4.3 STREET ADDRESS	(address unchanged)		
CITY-ST-ZIP	SYKESVILLE MD 21784			4.4 CITY-ST-ZIP			
TITLE	D	<input type="checkbox"/> DELETE		5.1 TITLE	DT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	FINECEY, SHANNON R			5.2 NAME	FINECEY, SHANNON R.		
STREET ADDRESS	418 UNION TOWN ROAD			5.3 STREET ADDRESS	(address unchanged)		
CITY-ST-ZIP	WESTMINSTER MD 21157			5.4 CITY-ST-ZIP			
TITLE	D	<input type="checkbox"/> DELETE		6.1 TITLE	DAT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	FINECEY, TROY E			6.2 NAME	FINECEY, TROY E.		
STREET ADDRESS	418 UNION TOWN ROAD			6.3 STREET ADDRESS	(address unchanged)		
CITY-ST-ZIP	WESTMINSTER MD 21157			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.

SIGNATURE *Kelly Finecey-Simms* KELLY FINECEY-SIMMS March 10, 1998 346-2665

CR2E034 (10/97)