

ANNUAL REPORT
1999Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000047717

1. Corporation Name

GULF BREEZE MEDIA, INC.

Principal Place of Business
118 WRIGHT PKY.
FT. WALTON BEACH FL 32548Mailing Address
118 WRIGHT PKY.
FT. WALTON BEACH FL 32548FILED
Jun 29, 1999 8:00 am
Secretary of State

06-29-1999 90003 013 *****8.75

06-29-1999 90003 014 ***150.00

* 615646 - 90014 - 11

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/27/1997

4. FEI Number

59-3460111

Applied For

Not Applicable

5. Certificate of Status Desired

☒\$8.75 Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution☐\$5.00 May Be
Added to Fees8. This corporation owes the current year Intangible
Personal Property Tax.☐ Yes☐ No

10. Name and Address of New Registered Agent

9. Name and Address of Current Registered Agent

HALE, JENNIFER F
118 WRIGHT PKY.
FT. WALTON BEACH FL 32548

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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ DELETENAME
D HALE, JENNIFER F
STREET ADDRESS
489 WRIGHT PKWY.
CITY-ST-ZIP
FWB FL 325481.2 NAME ☐ DELETENAME
S HALE, RONALD E
STREET ADDRESS
489 WRIGHT PKWY.
CITY-ST-ZIP
FWB FL 325481.3 STREET ADDRESS ☐ DELETENAME
T HALE, FRANK
STREET ADDRESS
489 WRIGHT PKWY.
CITY-ST-ZIP
FWB FL 325481.4 CITY-ST-ZIP ☐ DELETENAME
STREET ADDRESS
CITY-ST-ZIP1.5 CITY-ST-ZIP ☐ DELETENAME
STREET ADDRESS
CITY-ST-ZIP1.6 CITY-ST-ZIP ☐ DELETENAME
STREET ADDRESS
CITY-ST-ZIP

1.1 TITLE

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

☐ Change ☐ Add☐ Change ☐ Add☐ Change ☐ Add☐ Change ☐ Add☐ Change ☐ Add☐ Change ☐ Add

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 REQUIRED

SIGNATURE (AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR)

Date

Daytime Phone #

Ronald E Hale Jr July 15, 1999