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CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P97000081664 (9) DOCUMENT # 1. Corporation Name

AMELIA BEACH CORPORATION

FILED Apr 02 1998 8:00am Secretary of State



| Principal Place of Business Mailing Address | | | | | | | 4 I BALINDAL EIR IBILII SABILI ONILLI BRILLI OBILLI | MBIAK KEIRI IIBIB B | TILD BELLI | † 010E 1001 |
|---|--|------------------------|--|----------------------|------------|----------------------|--|---------------------|------------|--------------|
| 406 ASH ST. FERNANDINA BEACH FL 32034 | | | 406 ASH ST. FERNANDINA BEACH FL 32034 | | | | DO NOT WRITE I | N THIS SPACE | - | |
| | | | | | | | 3. Date Incorporated or Qualified | | | |
| | | | | | | | 09/19/1997 | | | |
| 2. Principal P | lace of Business | 2s. M | ailing Address | | | | 4. FEI Number | | Ap | plied For |
| 21 | | 26 | | | | | 58-2355141 | | | t Applicable |
| Suite, Apt #, etc. | | | Suite, Apt. #, etc. ' | | | | 5. Certificate of Stalus Desired Fee Required | | | |
| City & State | | | City & State | | | | 6. Election Campaign Financing \$5.00 May Be | | | |
| Zin Country | | | Zip Country | | | | Trust Fund Contribution | | | |
| Zip | | | | 30 | ni y | | 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes 🛣 No | | | |
| 24 | 9. Name and Address of Cu | [29] rrent Register | ed Agent | 1301 | | | 10. Name and Address of New Reg | | | |
| TO | | | | | B1 | Name | | | | |
| TOMASSETTI, JEFFREY 406 ASH ST. | | | | | B2 | Street Addre | ess (P.O. Box Number is Not Acceptable | e) | | |
| FE | RNANDINA BEACH FL 32034 | | | 1 | 83 | | | | | |
| | | | | 1 | B4 | City | | FL 85 | Zip C | Code |
| 11 Bureuant | to the provisions of Sections 607 | 0502 and 607 | 1508 Horida Statu | tos the she | OVE | anamad corn | oration submits this statement for the pu | | aina its | s registered |
| office or i | registered agent, or both, in the S im familiar with, and accept the ol | tate of Ftorida. | Such change was | authorized | by | the corporati | ion's board of directors. I hereby accept | the appointme | int as r | registered |
| SIGNATURE | | | | | | | | DATE | | |
| 12. | Signature, typed or printed name of registerer | AND DIRECTO | | 13. | Ager | ni signature require | ed when reinstating) ADDITIONS/CHANGES TO OFFICE | | CTOR | S IN 12 |
| TITLE | PSTD OFFICE | AND DIRECTE | DELETE | 11111 | F | | ADDITIONO/OFFANGED TO OFFICE | CI | | Addition |
| NAME | Stown R. Galla | _ | | 1.2 NAM | | | | _ | • | _ |
| STREET ADDRESS | 1669 N. Pelham | Ro | | | | ADDRESS | | | | |
| CITY-ST-ZIP | Atlanta GA 30 | | | 14 CITY | | | | | | |
| TITLE | VD | | DELETE | 2 1 THL | | | | □ CI | ange | Addition |
| NAME | Thomas D. Flater | 1 | | 2.2 NAN | A E | | | | | |
| STREET ADDRESS | 2241 Mainsail | C+ | | 23 STR | EE1 | ADDRESS | | | | |
| CITY-ST-ZIP | Marietta QA | 30062 | | 2.4 CIT | Y-S | ST-ZIP | | | | |
| TITLE | Ď | | DELETE | 3 1 TITL | | | | CI | ange | Addition |
| NAME | Paul L. Lavan | | | 3 2 NAM | ΛE | | | | | |
| STREET ADDRESS | 6575 Estate L | ane | | 3.3 STR | EFT : | ADDRESS | | | | |
| CITY-ST-ZIP | Loveland Olivo 45140 | | 3.4. CrT | 3.4. CiTY - ST - 7IP | | | | | | |
| TITLE | | | DELETE | 4 1 TITL | .E | | | ☐ CI | ange | Addition |
| NAME | David Worth | | | 4 2 NA | ME | | | | | |
| STREET ADDRESS | 3817 E1910 I | | | 4 3 S1R | EFT | ADDRESS | | | | į |
| CHY-ST-ZIP | Plano Texo | <u>1502</u> | 335 440 | | r-SI | T - ZIP | | | | |
| TITLE | | | DELETE | 5 1 THL | £ | | | ☐ Ch | ange | □ Addition |
| NAME | | | | 52 NAN | ΛE | | | | | |
| STREET ADDRESS | | | | 5 3 STR | EE1 | ADDRESS | | | | |
| CHY-ST-ZIP | | | | 5.4 C(I) | r-SI | T - ZIP | | | | |
| TITLE | | | ☐ DELETE | 61 TITL | €. | | | ☐ Ch | ange | Addition |
| NAME | | | | 62 NAM | ΛE | | | | | |
| STREET ADDRESS | | | | 63 S1R | EE1 | ADDRESS | | | | |
| CITY-ST-ZIP | | | | 64 C(T) | | | | | | |
| 14 Lhoroby | cortify that the information supplies | d with this filing | a done not applify f | or the ever | mest | tion stated in t | Section 119 07(3)(i) Florida Statutes Hi | irther certify th | at the | information |

I hereby cortify that the information supplied with this filling does not qualify for the exemption stated in Section 119 07(3)(), Florida Statutes, infurite certify that the information indicated on this annual report or suppliemental 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 this 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.