

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
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DOCUMENT # **P97000091636**

1. Corporation Name  
**Gibby, Inc.**

Principal Place of Business

Mailing Address

**PO Box 578  
Apalachicola FL 32329**

**SAME**

**FILED**

**98 DEC -1 PM 12:05**

**SECRETARY OF STATE  
TALLAHASSEE, FLORIDA**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

**10/24/1997**

4. FEI Number

☒ Applied For

☐ Not Applicable

5. Certificate of Status Desired

☐ **\$8.75** Additional Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐ **\$5.00** May Be Added to Fees

8. This corporation owes or has paid the current year intangible  
Personal Property Tax due June 30.

☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

25 Country

28 Zip

30 Country

9. Name and Address of Current Registered Agent

**Conrad, E.G. III  
93 22ND ST.  
Apalachicola, FL 32320**

10. Name and Address of New Registered Agent

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

☐ DELETE

11 TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

12 TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

13 TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

14 TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

15 TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

16 TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

17 TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

11 TITLE

12 NAME

13 STREET ADDRESS

14 CITY - ST - ZIP

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY - ST - ZIP

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY - ST - ZIP

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY - ST - ZIP

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY - ST - ZIP

61 TITLE

62 NAME

63 STREET ADDRESS

64 CITY - ST - ZIP

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

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:

**E.G. Conrad III**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**12/1/98 8506532593**  
DATE DAYTIME PHONE #

CR2E034 (10/97)

I, E.G. Conrad III, president of Gibby, Inc.  
certify that I did not receive my  
1998 corporate annual report.

E.G. Conrad III