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PROFIT				
CORPORATION				
ANNUAL REPORT				
1999				



FLORIDA DEPARTMENT OF STATE Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P98000046195

1. Corporation Name

Principal Place of Business	Mailing Address		- LIBBTIDER LID FRI URT I BYNY DARTI UTTIN ONTHE BETTE RE	IRTA ATIOL FIRM THING RITE INDI
1291 HAWTHORNE AVENUE CEDAR KEY FL 32625	POST OFFICE BOX 48 CEDAR KEY FL 32625		DO NOT WRITE IN THIS	SPACE
			3. Date Incorporated or Qualifed 06/01/1998	
2. Principal Place of Business	2a, Mailing Address		14. FEI Number 59-35 8333	Applied For
Suite, Apt. #, etc.	Suite, Apt. #, etc.			\$8.75 Additional
22	27		5. Certificate of Status Desired	Fee Required
City & State	City & State	-	8. Election Campaign Financing	\$5.00 May Ba
Zip Country	28 ZID	Country	Trust Fund Contribution	Added to Fees
24 25 25	<u>├</u> ~ `	30	8. This corporation owes the current year Intar	ngible ⊠Yes □No
9. Name and Address of Curr		30	Personal Property Tax. 10. Name and Address of New Registered A	<u> </u>
	granara cigora	81 Name		
CAUSEY, KATHRYN F		L Cana	ey, Hathryn 7.	
JACKSON'S ISLAND		82 Street Addr	ess (P.O. Box Number is Not Acceptable)	n st
12232 FRANKO CIRCLE		12.60	94 5-R. 34 6052 1	0 00
CEDAR KEY FL 32625		83		
· ·		84 Cipy	n Key, Fl FL	85 Zip Code 3 262 5
11. Pursuant to the provisions of Sections 607.0	502 and 607.1508, Florida Statute		oration submits this statement for the purpose of con's board of directors. I hereby accept the appoint	
office or registered egent, or both, in the Sta agent. I am strong with, and accept the obt	ite-of Florida. Such change was au leathns of Section 607 0505. Flor	uthorized bythe corporation	on's board of directors. Thereby accept the appoint	ment as registered
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SIGNATURE Strong of project of pr	theri and title if applicable ANOTE	Registered Gept signature require	white reinstating) 507486	77
	AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND	DIRECTORS IN 12
me ph (Stephen)	☐ DELETE			
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NUME 2 Forber W Sound		1,1 TITLE		Change Addition
	lerlin _	1.2 NAME		Change Addition
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STREET ADDRESS 129 Hawthorne OTY-ST-ZO Gedar Key FL TITLE VP, S	lerlin _	1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE		Change Addition
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enucated on uns 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 en 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 REQUIREDA

BIGHATURE AND TYPED OA PRINTED NAME OF SIGNING OFFICER OR DIRECTOR