

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

001468

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Mar 25, 1999 8:00 am
Secretary of State

03-25-1999 90012 014 ***150.00

DOCUMENT # P98000056675

1. Corporation Name

AMELIA SOUNDS, INCORPORATED



Principal Place of Business
1118-C SOUTH 14TH STREET
FERNANDINA BEACH FL 32034

Mailing Address
1118-C SOUTH 14TH STREET
FERNANDINA BEACH FL 32034

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/24/1998

4. FEI Number

59-3520164

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 the current year Intangible
Personal Property Tax. ☒ Yes ☐ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22 City & State

23

Zip Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip Country

29

30

9. Name and Address of Current Registered Agent

MCCARROLL, LORIE L C.P.A.
1890 SOUTH 14TH STREET
SUITE 200
FERNANDINA BEACH FL 32034

10. Name and Address of New Registered Agent

81 Name

McCarroll, Lorie L.

82 Street Address (P.O. Box Number is Not Acceptable)

2334 E. State Rd 200, Ste. 300

83

84

City Fernandina Beach

FL

85

Zip Code 32034

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

Lorie L. McCarroll, C.P.A.

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE
NAME WEBB, JAMES L
STREET ADDRESS 2413 FIRST AVENUE UNIT J-3
CITY-ST-ZIP FERNANDINA BEACH FL 32034

TITLE D ☒ DELETE
NAME WEBB, DOROTHY F
STREET ADDRESS 2413 FIRST AVENUE UNIT J-3
CITY-ST-ZIP FERNANDINA BEACH FL 32034

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D, Pres, Secr, Treas ☐ Change ☐ Addition
1.2 NAME WEBB, JAMES L.
1.3 STREET ADDRESS 2413 First Avenue, Unit J-3
1.4 CITY-ST-ZIP Fernandina Beach, FL 32034 ☐ Change ☐ Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
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, with all other like empowered.

SIGNATURE:

JAMES L WEBB
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/24/99
Date

904-261-0760
Daytime Phone #

CR2E034 (11/98)