**PROFIT** CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P98000057286

1. Corporation Name

SOUTH SI	HORES PROPERTIES, INC.		<u>.</u>						
Principal Place	of Business	Mailing Address				•			
306 SOUTH GERONINO STREET			306 SOUTH GERONIMO STREET						:
DESTIN FL 32541 DESTIN FL 32541					DO NOT WRITE IN THE	S SPACE			
					1	3. Date Incorporated or Qualifed		}	,
•					1	06/25/1998			3
		2a. Mailing Address				4. FEI Number		olled For	:
2. Principal Pla	ce of Business	26				59-3520227		Applicable	
21		Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 A		
Suite, Apt. #	, etc.	27				3. Certificate of Caster Park	Fee Re		
City & State		City & State				6. Election Campaign Financing	\$5.00 Added t		
_		28				Trust Fund Contribution		D F003	
Zip	Country	Zip	Cour	itry		8. This corporation owes the current year	mangible Yes	□No	
24	25	29	30			Personal Property Tax.  10. Name and Address of New Registers			
	9. Name and Address of Current	Registered Agent		81 Name		10. Name and Address of the			1
	10 DIGH D		- 1						
	IS, RICK D			82 Street	Addre	ss (P.O. Box Number is Not Acceptable)			;
	OUTH GERONIMO STREET		ì	83					
UESII	IN FL 32541			~			11 7:-		3
Į.				84 City			L 85 Zp	Code	
İ						vertion submits this statement for the purpose	of changing its	registered	- 1
								idistered i	
11. Pursuant t	o the provisions of Sections 607.0502	and 607.1508, Florida Statut M Florida, Such change was a	tes, the au authorized	by the com	oration	n's board of directors. I hereby accept the app	Manual in the re	<b>3</b>	3
11. Pursuant t office or re agent. I an	o the provisions of Sections 607.0502 gistered agent, or both, in the State on a familiar with, and accept the obligati	and 607.1508, Florida Statu Florida, Such change was a ions of, Section 607,0505, Flo	tes, the au authorized orlda Statt	by the com ites.	oration	n's board of directors. I hereby accept the app	XXII III III II II II II II II II II II	•	
agent. I an	n familiar with, and accept the obligati	ions of, Section 607,0505, Flo	orida Stati	ites.		DATE			18)
SIGNATURE	n familiar with, and accept the obligations to the obligation of the control of t	ions of, Section 607,0505, Flo	orida Stati	ites.			AND DIRECTO	DRS IN 12	1/98)
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signature  12.	Spokers, typed or privided name of registered agent OFFICERS ANI President	ons of, Section 607,0505, Fix and 85s Y applicable. (NOTI D DIRECTORS	erida Stati	Agent vignature		DATE	AND DIRECTO	DRS IN 12	034 (11/98)
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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 114. 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 114. 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 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 114. 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 114. I have the same legal effect as if made under oath; that I am an indicated on this annual report or the receiver or hustee empowered to execute this genor 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 illustrations.

May 03, 1999 8:00 am Secretary of State

05-03-1999 90123 031 \*\*\*300.00