

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



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

FILED
May 03, 1999 8:00 am
Secretary of State

05-03-1999 90036 037 ***150.00

DOCUMENT # P98000088698

1. Corporation Name

THE ESTUARY OF MOBBLY BAY, INC.

Principal Place of Business

1000 N. ASHLEY DRIVE SUITE 101
TAMPA FL 33602

Mailing Address

1000 N. ASHLEY DRIVE SUITE 101
TAMPA FL 33602

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/16/1998

4. FEI Number

59-3538002

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

2a. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

9. Name and Address of Current Registered Agent

BACON, DAVID A
2959 FIRST AVENUE NORTH
ST. PETERSBURG FL 33713

10. Name and Address of New Registered Agent

81 Name
James I. Rickard

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

c/o Rickard & Associates, P.A.

83 1000 N Ashley Drive, Suite 101

84 City
Tampa

FL

85 Zip Code
33602

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

James I. Rickard

DATE

4/28/99

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE

NAME MCNEEL, VAN L
STREET ADDRESS 5401 W. KENNEDY BLVD. STE. 751
CITY-ST-ZIP TAMPA FL 33609

TITLE D ☐ DELETE

NAME BULLARD, FRED B SR.
STREET ADDRESS 2325 ULMERTON RD. STE. 20
CITY-ST-ZIP CLEARWATER FL 34622

TITLE D ☐ DELETE

NAME RICKARD, JAMES I III
STREET ADDRESS 1000 N. ASHLEY DRIVE STE. 101
CITY-ST-ZIP TAMPA FL 33602

TITLE D ☐ DELETE

NAME OLSON, CHARLES
STREET ADDRESS 8390 139TH LANE NORTH
CITY-ST-ZIP SEMINOLE FL 33776

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 P ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE VP ☒ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE K-S ☒ 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

James I. Rickard

DATE

4/28/99

DAYTIME PHONE #

(813) 227-9555

CR2E034 (11/98)