

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000087540

1. Entity Name

TEA BY THE SEA, INC.

FILED
Jun 08, 2000 8:00 am
Secretary of State

06-08-2000 90042 003 ***150.00

Principal Place of Business

Mailing Address

128 MIRACLE STRIP PKWY., S.E.
 FT. WALTON BEACH FL 32548

128 MIRACLE STRIP PKWY., S.E.
 FT. WALTON BEACH FL 32548-5889

2. Principal Place of Business

236-238 Hwy 98, DESTIN FL

3. Mailing Address

236-238

Suite, Apt. #, etc.

HWY 98 EAST

Suite, Apt. #, etc.

HWY 98 EAST

City & State

DESTIN, FL

City & State

DESTIN FL

4. FEI Number

FIN 59-3600114

Applied For

Not Applicable

Zip

32541

Country

USA

Zip

32541

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

LIVINGSTON, JAN
 128 MIRACLE STRIP PKWY., S.E.
 FT. WALTON BEACH FL 32548

7. Name and Address of New Registered Agent

Name

LIVINGSTON JAN

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

236-238 HWY 98 EAST

City

DESTIN

FL

Zip Code

32541

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so. ☒
 (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

TITLE **D** ☐ Delete
 NAME **LIVINGSTON, JAN**
 STREET ADDRESS **128 MIRACLE STRIP PKWY., S.E.**
 CITY-ST-ZIP **FT. WALTON BEACH FL 32548**

TITLE **D** ☐ Delete
 NAME **BIGSBY, HEATHER**
 STREET ADDRESS **128 MIRACLE STRIP PKWY., S.E.**
 CITY-ST-ZIP **FT. WALTON BEACH FL 32548**

TITLE **D** ☐ Delete
 NAME **BIGSBY, SIMON D**
 STREET ADDRESS **128 MIRACLE STRIP PKWY., S.E.**
 CITY-ST-ZIP **FT. WALTON BEACH FL 32548**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **D** ☒ Change ☐ Addition
 NAME **LIVINGSTON JAN**
 STREET ADDRESS **236-238 HWY 98 EAST**
 CITY-ST-ZIP **DESTIN, FL 32541**

TITLE **D** ☒ Change ☐ Addition
 NAME **BIGSBY HEATHER**
 STREET ADDRESS **236-238 HWY 98 EAST**
 CITY-ST-ZIP **DESTIN, FL 32541**

TITLE **D** ☒ Change ☐ Addition
 NAME **BIGSBY SIMON**
 STREET ADDRESS **236-238 HWY 98 EAST**
 CITY-ST-ZIP **DESTIN, FL 32541**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

HEATHER BIGSBY
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

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