FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 FEB 23 PM 3:14

DOCUMENT # **S03989** **(8)**

1. Corporation Name
SANDCASTLES, INC. OF SOUTHWEST FLORIDA

Principal Place of Business
~~421 FIREBALL COURT~~
P.O. BOX 1248
PUNTA GORDA FL 33951-8248

Mailing Address
~~421 FIREBALL COURT~~
P.O. BOX 1248
PUNTA GORDA FL 33951-8248

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **09/28/1990**
3a. Date of Last Report: **02/22/1994**

2. Principal Place of Business
21: 2123 aaron st
22: Suite, Apt. #, etc.
23: Pt. Charlotte, Fl
24: Zip 33952
25: County Charlotte

2a. Mailing Address
26: Po Box 1248
27: Suite, Apt. #, etc.
28: Punta Gorda Fl
29: Zip 33952
30: County Charlotte

4. FEI Number: **65-0218064** ☐ 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. Does corporation owe any back taxes? Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

HEEKIN, JOHN CHARLES
21202 OLEAN BLVD.
SUITE C-2
PORT CHARLOTTE FL 33952

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

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: [signature] 2-14-95

12. OFFICERS AND DIRECTORS

TITLE	D
NAME	HENDRICKS, MIRIAM
STREET ADDRESS	~~421 FIREBALL CT~~ 2123 aaron ST
CITY-ST-ZIP	PUNTA GORDA FL Pt. Charlotte Fl 33952

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN '95

TITLE	DIRECTOR (D.) ☐ Change ☐ Addition
NAME	Hendricks, Miriam address only
STREET ADDRESS	2123 aaron ST
CITY-ST-ZIP	Pt. Charlotte Fl 33952

14. I (We) hereby certify that the information supplied with this report is complete and accurate, and that my (our) signature(s) on this report complies with the requirements of Chapter 607, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my (our) signature(s) on this report complies with the requirements of Chapter 607, Florida Statutes. I further certify 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 13 above, or on an attached report with an address.

SIGNATURE: Miriam Hendricks MIRIAM HENDRICKS 2-14-95 764-1184
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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