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

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

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CITY-ST-ZIP

STREET ADDRESS

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TITLE

TITLE

NAME

TITLE

NAME



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S29631

(6)

Mailing Address

SHIRLEY'S SHELL SHOP, INC.

KEY LARGO FU US		KEY LARGO FL 33037-1107 US						
					3. Date Incorporated or Qualified 02/04/1991	3a. Date of Last F 12/30/1996	Report	
2. Principal F	Place of Business	2a. Mailing Address			4. FEI Number	A	oplied For	
21	1 26				65-0238035)238035 Not Applica		
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Dosired	\$8.75 Additional Fee Required		
City & Sta	le	City & State			Election Campaign Financing Trust Fund Contribution	9 \$5.00 May Be Added to Fees		
Ζίρ 24	Country 25		Country 30	/		Yes 🔼 No	199.032,	
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Reg	istered Agent		
BAK	ER, CANDACE J		81	Name				
% TITTLE & TITTLE			82	Street Address (P.O. Box Number is Not Acceptable)				
91760 OVERSEAS HIGHWAY			102	direct Abo	et Abdress (F.O. Box Northber ts Not Acceptable)			
TAVERNIER FL 33070			83	83				
					·			
			84	City		FL 85 Zip	Code	
office or a	to the provisions of Sections 607 0502 registered agent, or both, in the State of am familiar with, and accept the obliga	of Florida. Such change was au	utnorized by	vithe corpora	rporation submits this statement for the pration's board of directors. I hereby accep	irpose of changing i	ts registered registered	
SIGNATURE	Signature, typed or printed name of registered agree	c and tille it application. (NOTE:	Registered Ag	on! signature requ	uired when reinstating)	DATE		
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTOR	RS IN 12	
TITLE	P	DELETE	1.1 TITLE			☐ Change	Addition	
NAME	BAKER, CANDACE J		1.2 NAME					
STREET ADDRESS	91760 OVERSEAS HIGHWAY		13 STREET	ADDRESS				
CITY-ST-ZIP	TAVERNIER FL 33070		1.4 CHY- 9	51-2IP				
TITLE	VP	DELETE	2 1 TITLE			☐ Change	☐ Addition	
NAME	LACEY, KATHRYN C		2.2 NAME					
STREET ADDRESS	91760 OVERSEAS HIGHWAY		23 STREET	ADDRESS				
CITY-ST-ZIP	TAVERNIER FL 33070		2 4 CHY-	S1 - 7/P				
TITLE		DELFTE	3.1 TITLE			Change	Addition	
NAME			3.2 NAME					
STREET ADDRESS	f		33 STREET	ADDRESS				

14. I do hereby certify that the information supplied with this filling 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 logal effect as if made under eath; 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.

3.4, CITY-S1-7IP

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CHTY- ST-ZIP

4.4 CHY-S1-ZIP

4.1 TITLE 4. 2 NAME

5.1 TITLE

5.2 NAME

61 TITLE

6.2 NAME

DELETE

DELETE

DELETE

SIGNATURE: Y Cardia & Cake

4-14-97 3

305-664-9467

Change

Change

Change

Addition

Addition

Addition

FILED

Apr 18 1997 8:00am

Secretary of State