FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B Mortham

Secretary of State
DIVISION OF CORPORATIONS

1996

DOCUMENT # S45076

1. Corporation Name

(4)

SHADES OF SEASIDE, INC.



	f Business	Mailing Address		i (Balia) il ili albar dini dalli ilatia	
P.O. BOX 4940 SANTA ROSA BEACH FL 32459		P.O. BOX 4940 Santa Rosa Beach FL 32459			
				3. Date Incorporated or Qualified	3a. Date of Last Report
				04/11/1991	04/11/1995
2. Principal Plac	e of Business	2a. Mailipe Address	VCO.	A FEt Number	Applied For
i 77. (0 13 x 1998	26 P. 6 12	6K 1998	NOT APPLICABLE	- Not Applicable
Surte, Apt. #,		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	2 Rea Bet Fr	City & State Pusa	a Bett. Fr.	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip Zoek	Country 25 Martin	7 71p	Country 30 WALTON	8. This corporation has liability for in Florida Statutes Yes	tangible tax under s. 199.032, ☐ No
4 50-4	g Name and Address of Curre			10. Name and Address of New Re	gistered Agent
	<u> </u>		81 Name	DEBORAH J.	HULEN
	100 1 14 MA 1 14 14 0		82 Ours Add	The state of the s	1.00
	NELL, WILLIAM G.		82 Street Add	MI GRANTON	TRAIL
	K STREET		83	· 	
SEAGRU	IVE BEACH FL 32459				or Zin Code
			84 City 3	MA Kisa Bull	FL 22/39
44 Durayasi ta	the provisions of Sections 602.05	in2 and 607 1508. Florida Statutes	the above named corpo	pration submits this statement for the purp	oose of changing its registered office
a containtain	all according to both and the State of FR	odzia. S ieb chande was authonzei	I by the corporation's boa	ard of directors. Thereby accept the appo	intment as registered agent. I am
familiar with	and accept the obligations of, Se	ection 607.0505, Florida Statutes.	, , –	Λ". Υ	130/96
SIGNATURE	//beron /1	and the tangent of the Market	60 rad J. Registered Agent signature restord	Allen	DATE
تـــــــــــــــــــــــــــــــــــــ	a a arc type a control of the contro				
4 -	OMODERS A	AND DIRECTORS	13	ADDITIONS/CHANGES TO OFFI	CERS AND DIRECTORS IN 12
		AND DIRECTORS DELETE	13.	ADDITIONS/CHANGES TO OFFI	CERS AND DIRECTORS IN 12 Change
TIFLE	P	AND DIRECTORS DELETE	1 3 TITLE	ADDITIONS/CHANGES TO OFFI	
TIFLE NAME	P ROGERS, JAMES T		1 1 TITLE 1.2 NAME	ADDITIONS/CHANGES TO OFFI	
TIFLE NAME STREET ADDRESS	P ROGERS, JAMES T 191 GRANTON TRAIL		1 1 TITLE 1.2 NAME 1.3 STHEET ADDRESS	ADDITIONS/CHANGES TO OFFI	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P ROGERS, JAMES T	☐ DELETE	1 1 TITLE 1.2 NAME	ADDITIONS/CHANGES TO OFFI	
TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE	P ROGERS, JAMES T 191 GRANTON TRAIL		1 1 TITLE 1.2 NAME 1.3 STHEET ADDRESS 1.4 CUTY - ST - ZIP 2 1 TITLE	ADDITIONS/CHANGES TO OFFI	Change C Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME	P ROGERS, JAMES T 191 GRANTON TRAIL	☐ DELETE	1 1 TITLE 1.2 NAME 1.3 STHEE1 ADDRESS 1.4 CUY-ST-ZIP 2 1 TITLE 2 2 NAME	ADDITIONS/CHANGES TO OFFI	Change C Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS	P ROGERS, JAMES T 191 GRANTON TRAIL	☐ DELETE	1 1 TITLE 1.2 NAME 1.3 STREET ADORESS 1.4 CUY-ST-ZIP 2 1 TITLE 2 2 NAME 2 3 STREET ADDRESS	ADDITIONS/CHANGES TO OFFI	Change C Addition
TIFLE NAME STREET ADDRESS CITY - ST - ZIP TIFLE NAME STREET ADDRESS CITY - ST - ZIP	P ROGERS, JAMES T 191 GRANTON TRAIL	☐ DELETE	1 1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CUY-ST-ZIP 2 1 TITLE 2 2 NAME 2 3 STREET ADDRESS 2.4 CUY-ST-ZIP	ADDITIONS/CHANGES TO OFFI	Change C Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY - ST - ZIP THLE	P ROGERS, JAMES T 191 GRANTON TRAIL	☐ DELETE	1 1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CUY-SI-ZIP 2 1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CUY-SI-ZIP 3 1 TITLE	ADDITIONS/CHANGES TO OFFI	Change Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME	P ROGERS, JAMES T 191 GRANTON TRAIL	☐ DELETE	1 1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 COY-SI-ZIP 2 1 TITLE 2 2 NAME 2 3 STREET ADDRESS 2 4 COY-SI-ZIP 3 1 TITLE 3 2 NAME	ADDITIONS/CHANGES TO OFFI	Change Addition
TIFLE NAME STREET ADDRESS CITY-ST-ZIP TIFLE NAME STREET ADDRESS CITY-ST-ZIP TIFLE NAME STREET ADDRESS STREET ADDRESS	P ROGERS, JAMES T 191 GRANTON TRAIL	☐ DELETE	1 1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 COY - ST - ZIP 2 1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 COY - ST - ZIP 3 1 TITLE 3.2 NAME 3.3 STREET ADDRESS	ADDITIONS/CHANGES TO OFFI	Change Addition
TIFLE NAME STREET ADDRESS CITY-ST-ZIP	P ROGERS, JAMES T 191 GRANTON TRAIL	☐ DELETE	1 1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 COY-ST-ZIP 2 1 TITLE 2 2 NAME 2 3 STREET ADDRESS 2 4 COY-ST-ZIP 3 1 TITLE 3 2 NAME 3 3 STREET ADDRESS 3 4 COY-ST-ZIP	ADDITIONS/CHANGES TO OFFI	Change Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE TITLE TITLE TITLE	P ROGERS, JAMES T 191 GRANTON TRAIL	☐ DELETE	1 1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 COY-ST-ZIP 2 1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 COY-ST-ZIP 3 1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 COY-ST-ZIP 4 1 TITLE	ADDITIONS/CHANGES TO OFFI	Change Addition
TIFLE NAME STREET ADDRESS CITY-ST-ZIP TIFLE NAME STREET ADDRESS CITY-ST-ZIP TIFLE NAME STREET ADDRESS CITY-ST-ZIP TIFLE NAME NAME NAME NAME	P ROGERS, JAMES T 191 GRANTON TRAIL	☐ DELETE	1 1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CHY-ST-ZIP 2 1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CHY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CHY-ST-ZIP 4.1 TITLE 4.2 NAME	ADDITIONS/CHANGES TO OFFI	Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP THLE NAME STREET ADDRESS CITY-ST-ZIP THLE NAME STREET ADDRESS CITY-ST-ZIP THLE NAME STREET ADDRESS	P ROGERS, JAMES T 191 GRANTON TRAIL	☐ DELETE	1 1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CHY-ST-ZIP 2 1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CHY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CHY-ST-ZIP 4.1 TIFLE 4.2 NAME 4.3 STREET ADDRESS	ADDITIONS/CHANGES TO OFFI	Change Addition
TIFLE NAME STREET ADDRESS CITY-ST-ZIP	P ROGERS, JAMES T 191 GRANTON TRAIL	DELETE	1 1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CHY-ST-ZIP 2 1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CHY-ST-ZIP 3 1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CHY-ST-ZIP 4 1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CHY-ST-ZIP 4 1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CHY-ST-ZIP	ADDITIONS/CHANGES TO OFFI	Change Addition
TIFLE NAME STREET ADDRESS CITY-ST-ZIP TIFLE NAME	P ROGERS, JAMES T 191 GRANTON TRAIL	☐ DELETE	1 1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CHY-ST-ZIP 2 1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CHY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CHY-ST-ZIP 4.1 TIFLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CHY-ST-ZIP 5.3 TITLE	ADDITIONS/CHANGES TO OFFI	Change Addition Change Addition Change Addition Change Addition
TIFLE NAME STREET ADDRESS CITY-ST-ZIP TIFLE NAME NAME NAME	P ROGERS, JAMES T 191 GRANTON TRAIL	DELETE	1 1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CHY-ST-ZIP 2 1 TITLE 2 2 NAME 2 3 STREET ADDRESS 2 4 CHY-ST-ZIP 3 1 TITLE 3 2 NAME 3 3 STREET ADDRESS 3 4 CHY-ST-ZIP 4 1 TITLE 4 2 NAME 4 3 STREET ADDRESS 4 4 CHY-ST-ZIP 5 VITLE 5 2 NAME	ADDITIONS/CHANGES TO OFFI	Change Addition Change Addition Change Addition Change Addition
TIFLE NAME STREET ADDRESS CITY-ST-ZIP TIFLE NAME STREET ADDRESS	P ROGERS, JAMES T 191 GRANTON TRAIL	DELETE	1 1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CHY-SI-2P 2 1 TITLE 2 2 NAME 2 3 STREET ADDRESS 2 4 CHY-SI-2P 3 1 TITLE 3 2 NAME 3 3 STREET ADDRESS 3 4 CHY-SI-2P 4 1 TITLE 4 2 NAME 4 3 STREET ADDRESS 4 4 CHY-SI-2P 5 1 TITLE 5 2 NAME 5 3 STREET ADDRESS	ADDITIONS/CHANGES TO OFFI	Change Addition Change Addition Change Addition Change Addition
TIFLE NAME STREET ADDRESS CITY-ST-ZIP	P ROGERS, JAMES T 191 GRANTON TRAIL	DELETE	1 1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CHY-SI-ZIP 2 1 TITLE 2 2 NAME 2 3 STREET ADDRESS 2 4 CHY-SI-ZIP 3 1 TITLE 3 2 NAME 3 3 STREET ADDRESS 3 4 CHY-SI-ZIP 4 1 TITLE 4 2 NAME 4 3 STREET ADDRESS 4 4 CHY-SI-ZIP 5 1 TITLE 5 2 NAME 5 3 STREET ADDRESS 6 4 CHY-SI-ZIP 5 1 TITLE 5 2 NAME 5 3 STREET ADDRESS 6 4 CHY-SI-ZIP	ADDITIONS/CHANGES TO OFFI	Change Addition Change Addition Change Addition Change Addition Change Addition
TIFLE NAME STREET ADDRESS CITY-ST-ZIP TIFLE	P ROGERS, JAMES T 191 GRANTON TRAIL	DELETE	1 1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CHY-SI-ZIP 2 1 TITLE 2 2 NAME 2 3 STREET ADDRESS 2 4 CHY-SI-ZIP 3 1 TITLE 3 2 NAME 3 3 STREET ADDRESS 3 4 CHY-SI-ZIP 4 1 TITLE 4 2 NAME 4 3 STREET ADDRESS 4 4 CHY-SI-ZIP 5 1 TITLE 5 2 NAME 5 3 STREET ADDRESS 6 4 CHY-SI-ZIP 6 1 TITLE 6 1 TITLE	ADDITIONS/CHANGES TO OFFI	Change Addition Change Addition Change Addition Change Addition Change Addition
TIFLE NAME STREET ADDRESS CITY-ST-ZIP TIFLE NAME	P ROGERS, JAMES T 191 GRANTON TRAIL	DELETE	1 1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CHY-SI-ZIP 2 1 TITLE 2 2 NAME 2 3 STREET ADDRESS 2 4 CHY-SI-ZIP 3 1 TITLE 3 2 NAME 3 3 STREET ADDRESS 3 4 CHY-SI-ZIP 4 1 TITLE 4 2 NAME 4 3 STREET ADDRESS 4 4 CHY-SI-ZIP 5 1 TITLE 5 2 NAME 5 3 STREET ADDRESS 5 4 CHY-SI-ZIP 6 1 TITLE 6 2 NAME	ADDITIONS/CHANGES TO OFFI	Change Addition Change Addition Change Addition Change Addition Change Addition
CITY-S1-ZIP TITLE NAME STREEL ADDRESS CITY-S1-ZIP TITLE NAME STREEL ADDRESS CITY-S1-ZIP TITLE	P ROGERS, JAMES T 191 GRANTON TRAIL	DELETE	1 1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CHY-SI-ZIP 2 1 TITLE 2 2 NAME 2 3 STREET ADDRESS 2 4 CHY-SI-ZIP 3 1 TITLE 3 2 NAME 3 3 STREET ADDRESS 3 4 CHY-SI-ZIP 4 1 TITLE 4 2 NAME 4 3 STREET ADDRESS 4 4 CHY-SI-ZIP 5 1 TITLE 5 2 NAME 5 3 STREET ADDRESS 6 4 CHY-SI-ZIP 6 1 TITLE 6 1 TITLE	ADDITIONS/CHANGES TO OFFI	Change Addition Change Addition Change Addition Change Addition Change Addition

4. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not quality for the exemption stated in Section 119.07 (b)(k), Florida Statutes. Fitting 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 as Block 13 if changed, or on an attacker? It with an address.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRE

Kogans 4/30/96 904-231-45

CR2E034 (12/9)