

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

APPROVED
AND
FILED

1997 JUL 24 PM 3:24

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PS 672

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| PROFIT CORPORATION ANNUAL REPORT 1997 |  | FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS |
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| DOCUMENT # S99210 (4) |
| 1. Corporation Name GRAND STRAND REALTY, INC. |

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|---|---|
| Principal Place of Business 8083 NAVARRE PKWY NAVARRE FL 32566 US | Mailing Address 8083 NAVARRE PKWY NAVARRE FL 32566 US |
|---|---|



DO NOT WRITE IN THIS SPACE

| | | | | | |
|--------------------------------|---------------------|---------------------|---------------------|---|--|
| 2. Principal Place of Business | | 2a. Mailing Address | | 3. Date Incorporated or Qualified 12/09/1991 | 3a. Date of Last Report 02/09/1996 |
| 21 | Suite, Apt. #, etc. | 26 | Suite, Apt. #, etc. | 4. FEI Number 59-3100010 | Applied For <input type="checkbox"/> Not Applicable |
| 22 | City & State | 27 | City & State | 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |
| 23 | Zip | 28 | Zip | 6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> | \$5.00 May Be Added to Fees |
| 24 | Country | 29 | Country | 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No | |

| | | | | | |
|---|--|--|--|--|--|
| 9. Name and Address of Current Registered Agent BLACK, EUBY 6880 TOM KING BAYOU ROAD NAVARRE FL 32566 | | | | 10. Name and Address of New Registered Agent | |
| | | | | 81 | Name |
| | | | | 82 | Street Address (P.O. Box Number is Not Acceptable) |
| | | | | 83 | |
| | | | | 84 | City |
| | | | | 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE _____

| | | | | | | | |
|----------------------------|-----------------------------|--|--|---|-----------------------------|--|--|
| 12. OFFICERS AND DIRECTORS | | | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | | | |
| TITLE | PVST | <input checked="" type="checkbox"/> DELETE | | 1.1 TITLE | PVST | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition | |
| NAME | BOYES, SARAH JOAN | | | 1.2 NAME | Nichols, Charles G. | | |
| STREET ADDRESS | 6803 GORDON EVANS RD | | | 1.3 STREET ADDRESS | 9508 Brentwood Blvd. | | |
| CITY-ST-ZIP | NAVARRE FL | | | 1.4 CITY-ST-ZIP | Navarre, FL 32566 | | |
| TITLE | | <input type="checkbox"/> DELETE | | 2.1 TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition | |
| NAME | | | | 2.2 NAME | | | |
| STREET ADDRESS | | | | 2.3 STREET ADDRESS | | | |
| CITY-ST-ZIP | | | | 2.4 CITY-ST-ZIP | | | |
| TITLE | | <input type="checkbox"/> DELETE | | 3.1 TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition | |
| NAME | | | | 3.2 NAME | | | |
| STREET ADDRESS | | | | 3.3 STREET ADDRESS | | | |
| CITY-ST-ZIP | | | | 3.4 CITY-ST-ZIP | | | |
| TITLE | | <input type="checkbox"/> DELETE | | 4.1 TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition | |
| NAME | | | | 4.2 NAME | | | |
| STREET ADDRESS | | | | 4.3 STREET ADDRESS | | | |
| CITY-ST-ZIP | | | | 4.4 CITY-ST-ZIP | | | |
| TITLE | | <input type="checkbox"/> DELETE | | 5.1 TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition | |
| NAME | | | | 5.2 NAME | | | |
| STREET ADDRESS | | | | 5.3 STREET ADDRESS | | | |
| CITY-ST-ZIP | | | | 5.4 CITY-ST-ZIP | | | |
| TITLE | | <input type="checkbox"/> DELETE | | 6.1 TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition | |
| NAME | | | | 6.2 NAME | | | |
| STREET ADDRESS | | | | 6.3 STREET ADDRESS | | | |
| CITY-ST-ZIP | | | | 6.4 CITY-ST-ZIP | | | |

14. I do 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.

SIGNATURE _____

CR2E034 (4/97)



GRAND STRAND REALTY, INC.



8083 Navarre Parkway • Navarre, Florida 32566
Office (850) 939-8000 • Fax (850) 939-8060

ps 2/2

July 21, 1997

Division of Corporations
Annual Reports Section
P.O. Box 1500
Tallahassee, FL 32302-1500

To Whom It May Concern,

Each year our office has received the "Annual Report" packet to file the corporation report. These returns have been filed usually no later than February. However this year our "courtesy" Annual Report packet for 1997 was not received in January. Instead on Friday, July 18, 1997 one was received and marked "Second Notice".

I do not know what happened to the original packet, but spoke with Andy in the Reinstatement Division. He said they are mailed out "in bulk" and unable to track. He suggested that a letter be attached to the report, explain that the initial packet had not been received and enclose the initial fee of \$165.00.

If you need to reach me regarding this matter, please contact me at 850-939-8100.

Sincerely,

Charles G. Nichols
President
GRAND STRAND REALTY, INC.

CGN/kah