

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

FILED  
Apr 30 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



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

DOCUMENT # V63093 (1)  
1. Corporation Name  
PEACHES OF THE GULF COAST INC.



Principal Place of Business

6879 N. 9TH AVE.  
PENSACOLA FL 32504  
US

Mailing Address

~~C/O MERCER-KURZ~~  
~~4632 NORTHPOINTE CIR.~~  
~~PENSACOLA FL 32514~~  
~~US~~

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/11/1992

4. FEI Number

59-3141698

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐ \$5.00 May Be  
Added to Fees

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30.

☐ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip 25 Country

2a. Mailing Address

26 4400 Bayou Blvd. #9

Suite, Apt. #, etc.

27 City & State

28 Pensacola, FL

29 Zip 32503 30 Country Ascambia US

9. Name and Address of Current Registered Agent

BECKER, ROBERT K  
4450 JUMENTO DR  
PENSACOLA FL 32514

10. Name and Address of New Registered Agent

81 Name Sydney D. Chamber, III  
82 Street Address (P.O. Box Number is Not Acceptable)  
4400 Bayou Blvd. #9  
83  
84 City Pensacola, FL 85 Zip Code 32503

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 not acceptable

(NOTE: Registered Agent signature required when reinstating)

DATE

3/13/98

12. OFFICERS AND DIRECTORS

TITLE V ☒ DELETE  
NAME ~~MERCER-KURZ, MARGARET~~  
STREET ADDRESS ~~4632 NORTHPOINTE CIR.~~  
CITY-ST-ZIP ~~PENSACOLA FL~~

TITLE President ☐ DELETE  
NAME Sydney D. Chamber, III  
STREET ADDRESS 277 Plantation Hill  
CITY-ST-ZIP Gulf Breeze, FL 32561

TITLE Sec/Treas. ☐ DELETE  
NAME Brenda C. Chamber  
STREET ADDRESS 277 Plantation Hill  
CITY-ST-ZIP Gulf Breeze, FL 32561

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. 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 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

Signature, typed or printed name of registered agent and not acceptable

4/26/98

CR2E034 (10/97)