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**Apr 18 1997 8:00am
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # **563854** (9)
1. Corporation Name
LA COQUILLE VILLAS, INC.



Principal Place of Business: **100 EVANS LANE
MANALAPAN FL 33468
US**

Mailing Address: **C/O DRENNEN L. WHITMIRE, JR.
500 S AUSTRALIAN AVE. SUITE 800
W PALM BCH FL 33401-6237
US**

3. Date Incorporated or Qualified: **04/06/1978** 3a. Date of Last Report: **06/24/1996**

2. Principal Place of Business (21-24) 2a. Mailing Address (25-30)

21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.

22 City & State 27 City & State

23 Zip 28 Zip Country 29 Country 30 Country

4. FEI Number: **59-1814662** 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. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

9. Name and Address of Current Registered Agent

**WHITMIRE, DRENNEN L. JR.
500 S AUSTRALIAN AVE, SUITE 800
W PALM BCH FL 33401**

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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

12. OFFICERS AND DIRECTORS

TITLE	P	<input type="checkbox"/> DELETE
NAME	ALCOCK, WARREN	
STREET ADDRESS	450 SOUTH OCEAN BLVD. VILLA 204-C	
CITY-ST-ZIP	MANALAPAN FL 33462	
TITLE	VP/T	<input type="checkbox"/> DELETE
NAME	PANGMAN, PETER	
STREET ADDRESS	500 SOUTH OCEAN BLVD. VILLA 107-C	
CITY-ST-ZIP	MANALAPAN FL 33462	
TITLE	VP/S	<input type="checkbox"/> DELETE
NAME	PRICE, STEPHEN W.	
STREET ADDRESS	100 EVANS LANE	
CITY-ST-ZIP	MANALAPAN FL 33462	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	P/D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	Alcock, Warren	
1.3 STREET ADDRESS	450 South Ocean Blvd. Villa 204C	
1.4 CITY-ST-ZIP	Manalapan FL 33462	
2.1 TITLE	VP/T/D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	Pangman, Peter	
2.3 STREET ADDRESS	500 South Ocean Blvd. Villa 107-C	
2.4 CITY-ST-ZIP	Manalapan, FL 33462	
3.1 TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	Campbell, James	
3.3 STREET ADDRESS	450 S. Ocean Blvd. Villa 305-B	
3.4 CITY-ST-ZIP	Manalapan, FL 33462	
4.1 TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	South, Furman III	
4.3 STREET ADDRESS	450 S. Ocean Blvd. Villa 104-C	
4.4 CITY-ST-ZIP	Manalapan, FL 33462	
5.1 TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.2 NAME	West, Martin Jr.	
5.3 STREET ADDRESS	450 S. Ocean Blvd Villa 202-B	
5.4 CITY-ST-ZIP	Manalapan, FL 33462	
6.1 TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6.2 NAME	Bates, Marie	
6.3 STREET ADDRESS	550 S. Ocean Blvd. Villa 205-D	
6.4 CITY-ST-ZIP	Manalapan, FL 33462	

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: *Stephen W. Price* VP/S **STEPHEN W. PRICE** Date: **4/14/97** Daytime Phone: **561-5864011**

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CRSE034 (9/96)

LA COQUILLE VILLAS INC.
1997 PROFIT CORPORATION ANNUAL REPORT
DOCUMENT #563854

ATTACHMENT FOR BLOCK 13:

7. 1. TITLE	D	ADDITION
7. 2. NAME	BROSSEAU, MARCEL	
7. 3. STREET ADDRESS	101 W. EVANS LANE	
7. 4. CITY-ST-ZIP	MANALAPAN, FL 33462	
8. 1. TITLE	D	ADDITION
8. 2. NAME	HOCKENJOS, FRED	
8. 3. STREET ADDRESS	201 W. EVANS LANE	
8. 4. CITY-ST-ZIP	MANALAPAN, FL 33462	
9. 1. TITLE	D	ADDITION
9. 2. NAME	MIDWOOD, NANCY	
9. 3. STREET ADDRESS	109 W. EVANS LANE	
9. 4. CITY-ST-ZIP	MANALAPAN, FL 33462	
10.1. TITLE	D	ADDITION
10.2. NAME	WREN, KAY	
10.3. STREET ADDRESS	115 W. EVANS LANE	
10.4. CITY-ST-ZIP	MANALAPAN, FL 33462	
11.1. TITLE	D	ADDITION
11.2. NAME	SMITH, JOSEPH	
11.3. STREET ADDRESS	202 W EVANS LANE	
11.4. CITY-ST-ZIP	MANALAPAN, FL 33462	
12.1. TITLE	D	ADDITION
12.2. NAME	EVANS, ROBERT	
12.3. STREET ADDRESS	1472 S. OCEAN BLVD.	
12.4. CITY-ST-ZIP	PALM BEACH, FL 33480	