

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

FILED
Apr 24 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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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 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address
21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.
22. City & State	27. City & State
23. Zip	28. Zip
25. Country	30. Country

3. Date Incorporated or Qualified 04/06/1978	
4. FEI Number 59-1814662	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
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

**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	PD	<input type="checkbox"/> DELETE
NAME	ALCOCK, WARREN	
STREET ADDRESS	450 SOUTH OCEAN BLVD. VILLA 204-C	
CITY-ST-ZIP	MANALAPAN FL	
TITLE	VPTD	<input type="checkbox"/> DELETE
NAME	PANGMAN, PETER	
STREET ADDRESS	500 SOUTH OCEAN BLVD. VILLA 107-C	
CITY-ST-ZIP	MANALAPAN FL	
TITLE	VPS	<input type="checkbox"/> DELETE
NAME	PRICE, STEPHEN W.	
STREET ADDRESS	100 EVANS LANE	
CITY-ST-ZIP	MANALAPAN FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	CAMPBELL, JAMES	
STREET ADDRESS	450 S OCEAN BLVD VILLA 305-B	
CITY-ST-ZIP	MANALAPAN FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	SOUTH III, FURMAN	
STREET ADDRESS	450 S OCEAN BLVD VILLA 104-C	
CITY-ST-ZIP	MANALAPAN FL	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	WEST JR, MARTIN	
STREET ADDRESS	450 S OCEAN BLVD VILLA 202-B	
CITY-ST-ZIP	MANALAPAN FL	

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	Pangman, Peter	
1.3 STREET ADDRESS	500 South Ocean Blvd Villa 107C	
1.4 CITY-ST-ZIP	Manalapan FL 33462	
2.1 TITLE	VP/D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	Campbell, James	
2.3 STREET ADDRESS	450 South Ocean Blvd Villa 305B	
2.4 CITY-ST-ZIP	Manalapan FL 33462	
3.1 TITLE	T/D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	Alcock, Warren	
3.3 STREET ADDRESS	450 South Ocean Blvd Villa 204C	
3.4 CITY-ST-ZIP	Manalapan FL 33462	
4.1 TITLE	O	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	Van Roijen Christopher	
4.3 STREET ADDRESS	450 South Ocean Blvd Villa 105C	
4.4 CITY-ST-ZIP	Manalapan FL 33462	
5.1 TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.2 NAME	Haney Emmy	
5.3 STREET ADDRESS	400 South Ocean Blvd Villa 207A	
5.4 CITY-ST-ZIP	Manalapan FL 33462	
6.1 TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6.2 NAME	Graham, William	
6.3 STREET ADDRESS	118 W Evans Lane	
6.4 CITY-ST-ZIP	Manalapan FL 33462	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(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 vps 2-26-98 561-586-4811

CR2E034 (10/97)

LA COQUILLE VILLAS, INC. 1998 PROFIT CORPORATION ANNUAL REPORT DOCUMENT #563854							
ATTACHMENT FOR BLOCK 12:							
TITLE	D			DELETE			
NAME	HOCKENJOS, FRED						
STREET ADDRESS	201 W. EVANS LANE						
CITY-ST-ZIP	MANALAPAN, FL 33462						
TITLE	D			DELETE			
NAME	MIDWOOD, NANCY						
STREET ADDRESS	109 W. EVANS LANE						
CITY-ST-ZIP	MANALAPAN, FL 33462						
TITLE	D			SAME AS LAST YEAR			
NAME	BATES, MARIE						
STREET ADDRESS	550 S. OCEAN BLVD. UNIT 205D						
CITY-ST-ZIP	MANALAPAN, FL 33462						
TITLE	D			SAME AS LAST YEAR			
NAME	BROSSEAU, MARCEL						
STREET ADDRESS	101 W. EVANS LANE						
CITY-ST-ZIP	MANALAPAN, FL 33462						
TITLE	D			SAME AS LAST YEAR			
NAME	SMITH, JOSEPH						
STREET ADDRESS	202 W. EVANS LANE						
CITY-ST-ZIP	MANALAPAN, FL 33462						
TITLE	D			SAME AS LAST YEAR			
NAME	WREN, KAY						
STREET ADDRESS	115 W. EVANS LANE						
CITY-ST-ZIP	MANALAPAN, FL 33462						
TITLE	D			SAME AS LAST YEAR			
NAME	EVANS, ROBERT						
STREET ADDRESS	1472 S. OCEAN BLVD.						
CITY-ST-ZIP	PALM BEACH, FL 33480						