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NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

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Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

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OCEA	inside Housing Develoi	PMENT CORPORATION,	INC.		
Principal Plac	ce of Business	Mailing Address		F 4001/1 1009/ 01/11 01000 81(81) (814	h kinar namin mannin manna mahani minan kinara 1000
1904 DREW STREET CLEARWATER FL 34625		1904 DREW STREET CLEARWATER FL 34825-9023			
				3. Date Incorporated or Qualified 10/17/1980	3a. Date of Last Report 06/13/1996
21	Place of Business	2a. Mailing Address 28		4. FEI Number APPLICABLE	Applied For Not Applicable
Suite, Apt.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stat		City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 24	Country 25	Zıp	Country 30	8. This corporation has liability for i	intangible tax under s. 199.032, ☐ Yes ☐ No
	9. Name and Address of Curre			10. Name and Address of New Re	
			81 Name		
BENEKE, STEPHEN G. 1904 DREW ST.		82 Street		ddress (P.O. Box Number is Not Acceptab	ole)
	WATER FL 33575		83	19-11	
			84 City		FL 85 Zip Code
11. Pursuant office or i	to the provisions of Sections 617.050 registered agent, or both, in the State)2 and 617.1508, Florida Statute of Florida, Such change was a	s, the above-named culhorized by the corpo	corporation submits this statement for the proration's board of directors. I hereby accept	ourpose of changing its registered of the appointment as registered
SIGNATURE				6/19/97	7
SIGNATURE	Signature, lyped printer hame of registered age	ent and title if applicable (NOTE	: Registered Agent signature re	equired when reinstating)	7
SIGNATURE	Signal J. lyped printeg name of registered ago OFFICERS AN	eni and litte if applicable (NOTE:	Registered Agent algorature re	equired when reinstating) ADDITIONS/CHANGES TO OFFICE	DATE CERS AND DIRECTORS IN 12
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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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 in changed, or on anythapy with an eddress.