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Apr 23 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **G20434** (8)

1. Corporation Name

VILLA DEL MAR DEVELOPMENT CORPORATION

Principal Place of Business

**712 SOUTH OREGON AVE.
TAMPA FL 33606**

Mailing Address

**712 SOUTH OREGON AVE.
TAMPA FL 33606-2543**



2. Principal Place of Business	2a. Mailing Address
21 3108 Prospect Road	26 3108 Prospect Road
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 Tampa, Florida	28 Tampa Florida
24 33629	29 33629
25 Country	30 Country

3. Date Incorporated or Qualified 01/18/1983	3a. Date of Last Report 06/28/1996
4. FEI Number 59-2377912	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
**WILLIAMS, GREGORY L
712 SOUTH OREGON AVE.
TAMPA FL 33606**

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL

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	DV	1.1 TITLE	DP
NAME	WILLIAMS, GREGORY L	1.2 NAME	Gregory L. Williams
STREET ADDRESS	3108 PROSPECT	1.3 STREET ADDRESS	3108 Prospect Rd
CITY - ST - ZIP	TAMPA, FL 00000	1.4 CITY - ST - ZIP	Tampa Flc 33629
TITLE	DP	2.1 TITLE	
NAME	LARSON, ROBERT L	2.2 NAME	
STREET ADDRESS	EAST DORALYN DR	2.3 STREET ADDRESS	
CITY - ST - ZIP	KISSIMMEE, FL 00000	2.4 CITY - ST - ZIP	
TITLE	D	3.1 TITLE	
NAME	LARSON, IRIS D	3.2 NAME	
STREET ADDRESS	EAST DORALYN DR	3.3 STREET ADDRESS	
CITY - ST - ZIP	KISSIMMEE, FL 00000	3.4 CITY - ST - ZIP	
TITLE	D	4.1 TITLE	DS
NAME	WILLIAMS, DANETTE L	4.2 NAME	Danette L. Williams
STREET ADDRESS	3108 PROSPECT	4.3 STREET ADDRESS	3108 Prospect Rd
CITY - ST - ZIP	TAMPA, FL 00000	4.4 CITY - ST - ZIP	Tampa Flc 33629
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	
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:

 **Gregory L. Williams**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/12/97
Date

813-254-6752
Daytime Phone #

CR2E034 (9/96)