

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 26, 1999 8:00 am
Secretary of State

04-26-1999 90063 035 ***150.00

DOCUMENT # P94000080517

1. Corporation Name

ORCHID ISLAND PROPERTIES, INC.

Principal Place of Business

**3125 WINDSOR BLVD
VERO BEACH FL**

Mailing Address

**3125 WINDSOR BLVD
VERO BEACH FL**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/02/1994

4. FEI Number

65-0530475

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 owes the current year Intangible
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

2a. Mailing Address

26 Suite, Apt. #, etc.

City & State

23

City & State

28

Zip Country

24

Zip Country

29

30

9. Name and Address of Current Registered Agent

**QUINN, JEROME D
3111 CARDINAL DR
VERO BEACH FL 32963**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12.

OFFICERS AND DIRECTORS

TITLE ☐ DELETE

**NAME
STREET ADDRESS
CITY-ST-ZIP
DC
WESTON, W GALEN
22 ST CLAIR AVE E SUITE 1901
TORONTO ONTARIO CANADA**

TITLE ☐ DELETE

**NAME
STREET ADDRESS
CITY-ST-ZIP
VD
DART, ROBERT J
22 ST CLAIR AVE E SUITE 2001
TORONTO ONTARIO CANADA**

TITLE ☐ DELETE

**NAME
STREET ADDRESS
CITY-ST-ZIP
PD
BROUGH, JOHN A.
3125 WINDSOR BLVD
VERO BEACH FL 32963**

TITLE ☒ DELETE

**NAME
STREET ADDRESS
CITY-ST-ZIP
VT
MIKESH, LINDA A.
3125 WINDSOR BLVD.
VERO BEACH FL**

TITLE ☐ DELETE

**NAME
STREET ADDRESS
CITY-ST-ZIP
S
QUINN, JEROME D
3111 CARDINAL DRIVE
VERO BEACH FL 32963**

TITLE ☐ DELETE

**NAME
STREET ADDRESS
CITY-ST-ZIP
V
BURNETT, ROBERT
3125 WINDSOR BLVD
VERO BEACH FL**

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☒ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4.16.99

561-388 8400

CR2E034 (11/98)

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