

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jul 13, 2006 8:00 am
Secretary of State

07-13-2006 90024 013 ***150.00

DOCUMENT # P98000101612

1. Entity Name
571 OCEANVIEW PROPERTIES, INC.



Principal Place of Business
C/O GRAY ROBINSON, P.A.
1800 W. HIBISCUS BLVD. #138
MELBOURNE, FL 32901

Mailing Address
C/O GRAY ROBINSON, P.A.
1800 W. HIBISCUS BLVD. #138
MELBOURNE, FL 32901

DO NOT WRITE IN THIS SPACE



07112006 No Chg-P CR2E034 (11/05)

4. FEI Number
65-0919095

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

HEALY, PATRICK F ESQ.
C/O GRAY ROBINSON, P.A.
1800 W. HIBISCUS BLVD. SUITE 138
MELBOURNE, FL 32901

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IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$550.00
Due by September 6, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
LECLERCQ, ALAIN
579 N. A1A, UNIT 601
SATELLITE BEACH, FL 32937

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PST
LECLERCQ, ALAIN
579 N. A1A, UNIT 601
SATELLITE BEACH, FL 32937

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 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 #

July 11, 2006 321-727-8100

GRAY|ROBINSON
ATTORNEYS AT LAW

ATTACHMENT

50022561

SUITE 138
1800 WEST HIBISCUS BLVD. (32901)
POST OFFICE BOX 1870
MELBOURNE, FL 32902-1870
TEL 321-727-8100
FAX 321-984-4122
gray-robinson.com

CLERMONT
JACKSONVILLE
KEY WEST
LAKE LAND
MELBOURNE
NAPLES
ORLANDO
TALLAHASSEE
TAMPA

phealy@gray-robinson.com

July 11, 2006

VIA FEDERAL EXPRESS

Department of State
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Re: 571 Oceanview Properties, Inc.
P98000101612

Gentlemen:

I am the Registered Agent for the above-referenced corporation. I recently received the enclosed Notice of Intent to Dissolve. However, I did not receive the corporation's annual reporting form. Accordingly, I would appreciate it if the Division would waive the additional fee of \$400.00 for late filing.

I enclose herewith a 2006 For Profit Corporation Annual Report Form for 571 Oceanview Properties, Inc. (which I downloaded from the Division's website), together with the annual report fee of \$150.00.

Thank you for your assistance with this matter.

Sincerely,



Patrick F. Healy

PFH:ads
Enclosure