


FILE NOW: FILING FEE AFTER MAY 1ST IS \$50.00

FILED
May 13 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Moram Secretary of State DIVISION OF CORPORATIONS
DOCUMENT # 231450 (8) 1. Corporation Name LOST TREE VILLAGE CORPORATION		
Principal Place of Business 3300 PGA BLVD SUITE 805 PALM BEACH GARDENS FL 33410	Mailing Address 3300 PGA BLVD SUITE 805 PALM BEACH GARDENS FL 3341	



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 12/28/1959	
21. Suite, Apt. #, etc.	22. City & State	26. Suite, Apt. #, etc.	27. City & State	4. FEI Number 59-0947833	Applied For Not Applicable
23. Zip	24. Country	28. Zip	29. Country	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
g. Name and Address of Current Registered Agent STONE, HELEN E 3300 PGA BLVD., STE 805 PALM BEACH GARDENS FL 33410				10. Name and Address of New Registered Agent	
				81. Name	
				82. Street Address (P.O. Box Number is Not Acceptable)	
				83. City	
				84. 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		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VD	1.1 TITLE	D
NAME	SHAFFER-BIGGS, MARGARET	1.2 NAME	SHAFFER, JOHN R
STREET ADDRESS	3300 PGA BLVD., STE 805	1.3 STREET ADDRESS	3300 PGA BLVD., STE 805
CITY-ST-ZIP	PALM BEACH GARDENS FL 33410	1.4 CITY-ST-ZIP	PALM BEACH GARDENS FL 33410
TITLE	D	2.1 TITLE	VD
NAME	REYNOLDS, JOHN D	2.2 NAME	STONE, HELEN E
STREET ADDRESS	3300 PGA BLVD., STE 805	2.3 STREET ADDRESS	3300 PGA BLVD., STE 805
CITY-ST-ZIP	PALM BEACH GARDENS F 33410	2.4 CITY-ST-ZIP	PALM BEACH GARDENS FL 33410
TITLE	AS	3.1 TITLE	AS
NAME	YWAN, TILARA E	3.2 NAME	YAWN, TILARA E
STREET ADDRESS	3300 PGA BLVD., STE 805	3.3 STREET ADDRESS	3300 PGA BLVD., STE 805
CITY-ST-ZIP	PALM BEACH GARDENS FL 33410	3.4 CITY-ST-ZIP	PALM BEACH GARDENS FL 33410
TITLE	STD	4.1 TITLE	VD
NAME	REYNOLDS, SHEILA B	4.2 NAME	SHAFFER, MARGARET B
STREET ADDRESS	3300 PGA BLVD., STE 805	4.3 STREET ADDRESS	3300 PGA BLVD., STE 805
CITY-ST-ZIP	PALM BEACH GARDENS FL 33410	4.4 CITY-ST-ZIP	PALM BEACH GARDENS FL 44310
TITLE	P	5.1 TITLE	P
NAME	BYER, CHARLES M JR.	5.2 NAME	BAYER, CHARLES M JR.
STREET ADDRESS	3300 PGA BLVD., STE 805	5.3 STREET ADDRESS	3300 PGA BLVD., STE 805
CITY-ST-ZIP	PALM BEACH GARDENS FL 33410	5.4 CITY-ST-ZIP	PALM BEACH GARDENS FL 33410
TITLE	V	6.1 TITLE	
NAME	ZERBOCK, LAURA M	6.2 NAME	
STREET ADDRESS	3300 PGA BLVD., STE 805	6.3 STREET ADDRESS	
CITY-ST-ZIP	PALM BEACH GARDENS FL 33410	6.4 CITY-ST-ZIP	

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.

SIGNATURE:

Laura Zerbock

4/29/98 (Sec) 1676-9711

CR2E034 (10/97)