

2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 23, 2006 8:00 am
Secretary of State

03-23-2006 90022 009 ***150.00

DOCUMENT # 244497

1. Entity Name

DRIFTWOOD APARTMENTS, INC.



Principal Place of Business

2655 LAKE DR
#8
RIVIERA BEACH FL 33404
US

Mailing Address

2655 LAKE DR
#8
RIVIERA BEACH FL 33404
US



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

1st MOORE

CR2E034 (10/05)

City & State

City & State

4. FEI Number

59-0997109

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CLARK, CLYDE R JR
2655 LAKE DRIVE
RIVIERA BEACH FL 33404

7. Name and Address of New Registered Agent

Name

Same as #6

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

City

FL

Zip Code

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 reactivating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2006 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	VP	<input type="checkbox"/> Delete
NAME	HICKERSON, FRED	
STREET ADDRESS	2655 LAKE DRIVE	
CITY-ST-ZIP	RIVIERA BEACH FL 33404	
TITLE	S	<input checked="" type="checkbox"/> Delete
NAME	WACHTER, MARK T	
STREET ADDRESS	2655 LAKE DRIVE	
CITY-ST-ZIP	RIVIERA BCH FL 33404	
TITLE	President	<input type="checkbox"/> Delete
NAME	Clyde R. Clark, Jr.	
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	President	<input type="checkbox"/> Delete
NAME	Clark, Clyde R. Jr.	
STREET ADDRESS	2655 Lake Drive	
CITY-ST-ZIP	Riviera Beach, Fl.	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	Secy./Treas.	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Hickerson, Fred	
STREET ADDRESS	2655 Lake Drive	
CITY-ST-ZIP	Riviera Beach Fl. 33404	
TITLE	VP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Jan Wells	
STREET ADDRESS	2655 Lake Drive	
CITY-ST-ZIP	Riviera Beach Fl. 33404	
TITLE	VP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Wells, Jan	
STREET ADDRESS	2655 Lake Drive	
CITY-ST-ZIP	Riviera Beach, Fl. 33404	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:

Clyde R. Clark, Jr. Pres. (Clyde R. Clark, Jr. 3/23/06

Date

Daytime Phone #

561/842-
6659