FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **257961** **(3)**

1. Corporation Name

OCEAN BREEZE PARK INC

Principal Place of Business

3000 INDIAN RIVER DR
JENSEN BEACH FL 34957

Mailing Address

3000 INDIAN RIVER DR
JENSEN BEACH FL 34957

2. Foreign Place of Business
21
Suite Apt #
22
City & State
23
Zip
24
Country
25

2a. Mailing Address
26
Suite Apt #
27
City & State
28
Zip
29
Country
30

3. Date Incorporated or Qualified: **04/12/1962**

3a. Date of Last Report: **01/20/1995**

4. FEI Number: **59-0996174** 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 Statute ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

HOKE, RUTH L
3000 INDIAN RIVER DR
JENSEN BEACH FL 34957

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. For the purpose of Section 607.0505, 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. The name and address of the registered agent and office is hereby accepted. I am familiar with, and hereby accept the obligations of, Section 607.0505, Florida Statutes.

Signature(s)

12. OFFICERS AND DIRECTORS

V ☐ Delete
TEAL, CATHIE H
3000 INDIAN RIVER DRIVE
JENSEN BEACH FL

P ☐ Delete
HOKE,RUTH L
3000 INDIAN RIVER DR
JENSEN BEACH FL

S ☐ Delete
CHICKY, SHARON
3000 INDIAN RIVER DR
JENSEN BEACH FL

☐ Delete

☐ Delete

☐ Delete

☐ Delete

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change XX Addition

Director
Tom Royster
U.S. 1 & Colorado Ave.
Stuart, FL

☐ Change ☐ Addition

☐ Change ☐ Addition

CR2E034 (12/95)

14. I hereby 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 a 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 above, or on an attached exhibit, as such officer or director or receiver or trustee.

SIGNATURE: Ruth L Hoke — 1-15-96 — 407-334-2494

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone

Ruth L. Hoke, president