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

**PROFIT** CORPORATION ANNUAL REPORT

1998

SIGNATURE:



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(5)

CORAL REEF PARK CO., INC.

FILED Mar 19 1998 8:00am Secretary of State



(305)451 1621

Principal Place of Business Mailing Address MM 102 US HWY. 1 MM 102 US HWY. 1 **BOX 1580** BOX 1580 KEY LARGO FL 33037 KEY LARGO FL 33037 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 07/09/1963 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-1027669 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6, Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Zip Country 8. This corporation owes or has paid the current year Intangible 24 25 29 Personal Property Tax due June 30. ☐ Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent PEGRAM.GEORGE RANDALL Name 167 INDIAN MOUND TRAIL 62 Street Address (P.O. Box Number is Not Acceptable) **TAVERNIER FL 33070** 83 City 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 Stato 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, typed or printed name of registured agent and title if applicable (NOTE: Registered Agent algorature required when reinstalling) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS DELETE 11 TITLE Change Addition TITLE PEGRAM, GEORGE R. NAME 1.2 NAME **167 INDIAN MOUND TRAIL** STREET ADDRESS 1.3 STREET ADORESS TAVERNIER FL CITY-ST-ZIP 1.4 CITY-ST-ZIP □ DELETE ☐ Change Addition 2.1 TITLE PEGRAM, MARY L. NAME 2.2 NAME 167 INDIAN MOUND TRAIL STREET ADDRESS 2.3 STREET ADDRESS TAVERNIER FL CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE PEGRAM, BRIAN NAME 3.2 NAME 167 INDIAN MOUND TRAIL 3.3 STREET ADDRESS STREET ADDRESS TAVERNIER FL CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE ☐ Change Addition TITLE 4.1 TITLE NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP Addition DELETE Change TITLE 51 TITLE NAME 5.2 NAME **5.3 STREET ADDRESS** STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP TITLE DELETE 6.1 TITLE Change Addition NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 open appears with an address.