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

PROFIT CORPORATION ANNUAL REPORT : 1999

O'LEARYS COASTAL RENTALS, INC.



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

Secretary of State

02-02-1999 90013 007 ***150.00

FILED

Feb 02, 1999 8:00am



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rincipal Place of Business Mailing Address			,						
BAYFRONT D		7363 PERIWINKLE DR SARASOTA FL 34231-5321							
ARASOTA FL 34236		US				DO NOT WRITE IN THIS SPACE			
,						3. Date Incorporated or Qualifed			
						05/10/1967			
Principal Place of Business 2a. Mailing Address						4. FEI Number		Ar	plied For
26		⊢ ¬				59-1263972		- ·	t Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.								 	Additional
Suite, Apt.	#, etc.	····				5. Certifcate of Status Desired			equired
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,			•			6. Election Campaign Financing Trust Fund Contribution			мау ве to Fees
L		. 28	Cou	intry					101 563
Zip	Country	Zip	_	ни у		8. This corporation owes the cum	ant year in	tangible ☑Yes	□No
· ` <u>:</u>	25		30	1		Personal Property Tax.			LINO
	9. Name and Address of Current	Registered Agent		04	Nam-	10. Name and Address of New F	registered	Agent	
00.5	ADV MM LIARA T			81	Name	•		:	
O'LEARY WILLIAM T.			82 Street Addr			iress (P.O. Box Number is Not Accepta	able)		
	PERIWINKLE DR.					93 (18 a) 3 N S # 193 (18 a) 4	· · · • · · · · · · · · · · · · · · · ·	9-69- 53P3- F1511.	** - 14 - 21 - 17 - 17 - 17 - 17 - 17 - 17 - 17
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				84	City		Ę۱	85 Zip	Códe ****
part to be a second	to the provisions of Sections 607.0502			\perp			nurnoco o	E changing its	registered
IGNATURE	to the provisions of Sections 607,0502 egistered agent, or both, in the State of m familiar with, and accept the obligati Signature, typed or printed name of registered agent					ed when reinstating) (2*	DATE		
2.	OFFICERS AND	DIRECTORS	13.			ADDITIONS/CHANGES TO OF	FICERS A		
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	SARASOTA FL			ITY-SI					
TY-ST-ZIP		☐ DELETE	2.1 T		1-21-		_	Change	Addition
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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, with all other like empowered.