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

**PROFIT CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

THE OCEANS RACQUET CLUB, INC.

(0)

## **FILED** Mar 27 1998 8:00am Secretary of State



Principal Place of Business		Mailing Address						0.0., 0.0., 0.0.	
3000 SOUTH ATLANTIC AVENUE		3000 SOUTH ATLANTIC AVENUE							
DAYTONA BCH SHORES FL 32118-6102		DAYTONA BCH SHORES FL 32118-6102			DO NOT WRITE IN THIS SPACE				
						3. Date Incorporated or Qualified	114 11113	3F ACE	
						06/09/1976			
Principal Pl	lace of Business	2a. Mailing Address				4. FEI Number	<del> </del>	Ar	oplied For
21	according to the control of the cont	26			<b>59-1698673</b> Not Applicable				
Suite, Apt.	#. etc.	Suite, Apt. #, etc.						\$8.75	
22		27				5. Certificate of Status Desired			polited
City & State		City & State			Election Campaign Financing		\$5.00	May Be	
23		28				Trust Fund Contribution		Added	
Zip	Country	Zip	C	ountry		8. This corporation owes or has pa	_	_ ′ -	
24	25	29	30			Personal Property Tax due June			No No
	g. Name and Address of Currer	nt Registered Agent		1		10. Name and Address of New Re	gistered .	Agent	
	MBLESON, J. D			81	Name				
150 S. PALMETTO AVE.				82	Street Ac	dress (P.O. Box Number is Not Acceptab	le)		
DA	YTONA BEACH FL 32114								
				83					
				84	City		FL	85 Zip	Code
	007.010	10 and 007 4500. Florido Chat.	dos the			orporation submits this statement for the p			to registered
office or re agent. La	to the provisions of Sections 607,050 egistered agent, or both, in the State m famíliar with, and accept the oblig	e of Florida. Such change was ations of, Section 607.05 <mark>05,</mark> F	authoriz Forida St	ed by alutes	the corpo	orporation's board of directors. I hereby accept	ot the app	pointment as	registered
SIGNATURE							DATE		
	Signature, typed or pented name of registered age OFFICERS AN		13		nt signature re	quired when reinstating)  ADDITIONS/CHANGES TO OFFIC		) DIRECTOR	RS IN 12
TITLE	PD	DELETE	_	TITLE		ADDITIONS/CHANGES TO CITIC	ACINO AINE	Change	Addition
NAME	UANINO, ANTHONY			NAME	1				_
STREET ADDRESS	4000 OLD DIXIE HWY				ADDRESS				
CITY-ST-ZIP	ORMOND BEACH FL			CITY-S					
TITLE	D	DELETE	_	TITLE			•	Change	Addition
NAME	UANINO, ANTHONY		2.2	NAME					
STREET ADDRESS	2990 S. ATLANTIC AVE.		- 6		ADDRESS				
CITY-ST-ZIP	DAYTONA BCH. SHORES FL.			CITY-S			•		
TITLE	81	☐ DELETE		TITLE			•	Change	☐ Addition
NAME	MURPHY, GLORIA F.		3.2	NAME					
STREET ADDRESS	2990 S ATLANTIC AVE		3.3	STREET	ADDRESS				
CITY-ST-ZIP	DAYTONA BCH SHRS FL		3.4	. CITY-S	61-2IP				
TITLE		☐ DELETE	4.1	TITLE	1.			Change	Addition
NAME			4.2	NAME					
STREET ADDRESS			4.3	STREET	ADDRESS				
CITY-ST-ZIP	<u> </u>		4.4	CITY - S	T-ZIP				
TITLE		DELETE	5.1	TITLE				Change	☐ Addition
NAME			5.2	NAME					
STREET ADDRESS			5.3	STREET	ADDRESS				
CITY-ST-ZIP			5.4	CATY-S	T- Z(P				
TITLE		☐ DELE <b>TE</b>	6.1	TITLE				Change	Addition
NAME			6.2	NAME					
STREET ADDRESS			6.3	STREET	ADDRESS				·
			• • • • • • • • • • • • • • • • • • • •						

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 pustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changer, or an attachment with an address.