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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 520806

(1)

MONTEREY DEVELOPMENT, INC.

FILED	
Jan 17 1997 8:00am	1
Secretary of State	

Principal Place of Business Mailing Addres		Mailing Address	T KORNOL BUIND HIGH BONK BOKK BONK BONK BIRN BIRN BIRN BIRN BIRN BIRN BIRN BIRN		IBDI DIBII BIBII BIBII BIBII DIBII IADI
1880 DR. ANDR	E'S WAY	188 DR. ANDRE'S WAY			
SUITE B		SUITE B			
DELRAY BCH. I	FL 33445	DELRAY BCH. FL 33445			
US		US		 Date Incorporated or Qualified 12/22/1976 	3a. Date of Last Report 01/31/1996
2. Principal P	lace of Business	2a. Mailing Address	1	4. FEI Number	Applied For
21		26 1880 DR. A	NRE'S WAY	59-1708940	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stat	e	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28 DELRAY BC	4. FL	Trust Fund Contribution	Added to Fees
Zıp	Country	Zip	Country	8. This corporation has liability for in	ntangible tax under s. 199.032.
24	25	29 33447 30	$\sigma u : S$		Yes 🔲 No
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Reg	jistered Agent
AND	ERSON, JEFFREY		81 Name		
DR A	NDRES WAY	•	82 Street Addre	ess (P.O. Box Number is Not Acceptable	[a]
SUIT	EB		Jileet Addre	ess (F.O. Box Number is Not Acceptable	le)
BOY	NTON BEACH FL 33436		83		
			84 City		85 Zip Code
			'		FL []
11. Pursuant	to the provisions of Sections 607 0502	and 607.1508, Florida Statutes,	the above-named corpo	oration submits this statement for the pi	urpose of changing its registered
agent. I a	registered agent, or both, in the State on In familiar with, and accept the obliga	of Florida, Such change was aut tions of, Section 607,0505, Florid	norized by the corporati da Statutes.	on's board of directors. I hereby accep	t the appointment as registered
SIGNATURE					
Sidivatoric	Signature, types or proted name of registered agen	t and tile Lappicable (NOTE: F	legistered Agent signature require	d when reinstating)	DATE
12.	OFFICERS AND	DIRECTORS	13.	ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTORS IN 12
TITLE	SD	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	ANDERSON, NORMAN E.		1.2 NAME		
STREET ADDRESS	1301 PARTRIDGE PLACE NO		1.3 STREET ADDRESS		
CITY - ST - ZIP	BOYNTON BEACH FL		1.4 CiTY - ST - ZIP		
TITLE	PO	DELETE	2 1 TITLE		Change Addition
NAME	ANDERSON, JEFFREY M.		2 2 NAME		
STREET ADDRESS	1396 PARTRIDGE PLACE NO		2 3 STREET ADDRESS	•	
CITY - S1 - ZIP	BOYNTON BCH FL		2 4 City-St-ZiP		
TITLE		DELETE	31 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3 3 STREET ADDRESS		
CITY - ST - ZIP			3.4. CITY - ST - ZIP		
TITLE		DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		-
STREET ADDRESS			4 3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY - ST - ZIP		
TITLE		DELETE	4.9 CHT - SI - ZIP		Change Addition

14. I do nereby 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.

5.2 NAME

61 TITLE

62 NAME

5.3 STREET ADDRESS 5.4 CITY+ST-ZIP

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

SIGNATURE:

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-\$1-ZIP

MOULDING OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DELETE

1/6/1997 561-278-0021

☐ Change

Addition