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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Mar 31 1997 8:00am

Secretary of State

(561) 221-181)

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 538862

(4)

SIGNATURE:

····	DEL LAGO, INC.		···						
Principal Frace of Business Mailing Address 55 EAST OCEAN BLVD. 55 EAST OCEAN BL STUART FL 34994 STUART FL 34994-27						1 100107 21100 11151 1210 12110 21110 1121	11 4 11 718 11 8)	PI DIRI BIBII !	WeW#1 18WL
						3. Date Incorporated or Qualified 07/07/1977		te of Last R	teport
— <u>`</u>	race of Business	2a. Mailing Addres	S			4. FEI Number			pplied For
Suite, Apt	#. etc	[26] Suite, Apt. #, e	tc			59-1842261 Not Applicab			
22		27	27			5. Certificate of Status Desired	X		equired
City & State		man i	City & State			6. Election Campaign Financing			May Be
23] Ζφ	Country	28		ountry	<u></u>	Trust Fund Contribution	ntoocible		to Fees
24	25	29	30	,		8. This corporation has liability for in Florida Statutes	Yes		. 199.032,
	9. Name and Address of Curre	ent Registered Agent				10. Name and Address of New Re	gistered /	\gent	
	, WILLIAM E JR			81	Name				
55 EAST OCEAN BLVD. STUART FL 34994				82	Street Add	ress (P.O. Box Number is Not Acceptat	le)		
310	MNI FL 34884			83	_,				
				-				T T =:-	
				84	City		FL	85 Zip (Code
12.		ND DIRECTORS	1:	3.	ent signature requi	red when reinstaling) ADDITIONS/CHANGES TO OFFIC	DATE ERS AND		
THEF	PC	☐ DELI		1 THILE				Change	Addition
NAME STREET ADDRESS	WRIGHT, RICHARD A. 300 COLORADO AVE.			2 NAME o chocch	ADDRESS				
CHY ST Zir	STUART FL 34994			a SINLLI 4 DITY - S	- 1				
THE		DELI		1 TITLE				Change	Addition
HAME			2:	2 NAME					
STREET ADDRESS					ADDRESS				
CITY ST Zdr Tilt€		DELE		4 CITY-5 1 TITLE	ST-ZIP			☐ Change	Addition
NAME:				2 NAME					
STREET ADDRESS			3.3	3 STREET	ADDRESS				
CITY-ST ZIP				4. CITY-5	ST-ZIP				1 4 4 8 6
THE TOTAL STREET		[DELI		1 TITLE	1			L Change	Addilion
NAME STREET ALDERES				2 NAME 3 street	ADDRESS				
CITY ST ZIP				a Gity - S					
THE		DEL		1 TITLE				☐ Change	Addition
NAME			5.3	2 NAME					
STREET ADORESS					ADDRESS				
CITY SI-ZIP		OELI		4 CITY - S	IT- ZIP			Chann	Addition
HILE NAME		L'1 pru		1 TITLE 2 NAME				L Change	Addition
STREET ADDRESS:			1		ADDRESS				
CHY-ST ZIP				4 CITY-S					
14. Loo heret	by certify that the information suppli	ed with the filing does no	t qualify for t	he exe	mption slated	d in Section 119.07(3)(i), Florida Statute	s. I further	certify that	the
Lan. an o	in indicated on this annua' report of flicer or director of the corporation in Block 12 or Block 13 if charged.	or the acceiver or trustee	empowered to	o exec	urate and that cute this repor	t my signature shall have the same legant of required by Chapter 607, Florida S	i effect as tatutes; ar	if made un nd thal my r	der oath; that name