

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 555451 (4)

1. Corporation Name

CORAL HARBOR DEVELOPERS, INC.



Principal Place of Business

375 UNIVERSITY CIR.  
ATHENS GA 30605  
US

Mailing Address

P. O. BOX 80366  
ATHENS GA 30608  
US

2. Principal Place of Business

2a. Mailing Address

21

Suite, Apt. #, etc.

26

Suite, Apt. #, etc.

22

City & State

27

City & State

23

Zip

Country

28

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

TITTLE, FRED  
VAUGHN BUILDING  
TAVERNIER FL 33070

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85

Zip Code

3. Date Incorporated or Qualified

12/16/1977

3a. Date of Last Report

01/30/1995

4. FEI Number

59-1807172

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☐ Yes ☒ No

10. Name and Address of New Registered Agent

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 State 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

Signature of person or persons authorized to sign this report

Signature of Registered Agent (signature required when changing agent)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ DELETE

NAME  
COKER, J. A.  
STREET ADDRESS  
375 UNIVERSITY CIR  
CITY-STATE-ZIP  
ATHENS GA

1.1 TITLE ☐ Change ☐ Addition

2.1 TITLE ☐ DELETE

NAME  
SAWDY, J W  
STREET ADDRESS  
RT 2 BOX 1179  
CITY-STATE-ZIP  
LANCASTER VA

2.1 TITLE ☐ Change ☐ Addition

3.1 TITLE ☐ DELETE

NAME  
TITTLE, FRED  
STREET ADDRESS  
VAUGHN BLDG  
CITY-STATE-ZIP  
KEY LARGO, FL 00000

3.1 TITLE ☐ Change ☐ Addition

4.1 TITLE ☐ DELETE

NAME  
WOLAVER, R O  
STREET ADDRESS  
ORANGE BLOSSOM  
CITY-STATE-ZIP  
KILAUEA HI

4.1 TITLE ☐ Change ☐ Addition

5.1 TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-STATE-ZIP

5.1 TITLE ☐ Change ☐ Addition

6.1 TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-STATE-ZIP

6.1 TITLE ☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JOHN A. COKER

RESIDENT

1/25/96

(706) 208-1945

Company Phone #

CR2E034 (12/95)