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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

Feb 20, 1999 8:00 am Secretary of State 02-20-1999 90066 032 \*\*\*150.00

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**FILED** 

1999

DOCUMENT # 641643

1. Corporation Name

SEA RANCH-FOREST RIDGE, INC.

				No.			
Principal Place	of Business	Mailing Address		4-	cash asher in the second		
312 SE 17TH STREET 312 SE 17TH STREET SUITE 300 SUITE 300 FT. LAUDERDALE FL 33316 FT. LAUDERDALE FL 33316					DO NOT WRITE IN THIS	SPACE	
FIL ENDUCTORE TE SOOTO					3. Date Incorporated or Qualifed		
					10/11/1979		
2. Principal Pl	2a. Mailing Address			4. FEI Number	. Ap	oplied For	
21		26			65-0023736	No	ot Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				\$8.75	Additional
22		27			5. Certificate of Status Desired	Fee Re	equired
City & State	9	City & State			6. Election Campaign Financing	\$5.00	May Be
23		28			Trust Fund Contribution	Added t	to Fees
Zip	Country	Zip	Count	ry	8. This corporation owes the current year Int		_
24	25 29		30		Personal Property Tax.	∐ Yes	□No
Name and Address of Current Registered Agent				.1	10. Name and Address of New Registered	Agent	
D	4ED 014B1E0		8	1 Name			
PALMER, CHARLES L.			8	2 Street Add	dress (P.O. Box Number is Not Acceptable)		
312 SE 17TH STREET					4		
	E 300		8	3	· ·		
FIL	AUDERDALE FL FL 33316		8	4 City		85 Zip (	Code
	•			1	<b>FL</b>	<b>-</b>   ``   ``	
office or n	to the provisions of Sections 607.050, egistered agent, or both, in the State in familiar with, and accept the obliga	of Florida. Such change was au	thorized b	v tne corporat	rporation submits this statement for the purpose of tion's board of directors. I hereby accept the appo	changing its intment as re	registered gistered
SIGNATURE	·				-		
	Signature, typed or printed name of registered ager	· · · · · · · · · · · · · · · · · · ·		ent signature requir	red when reinstating)  ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTO	DS IN 12
12.		ID DIRECTORS	13.	:	ADDITIONS/CHANGES TO OFFICERS AF	☐ Change	Addition
TITLE	P	- DELETE	1.1 TITLE				
NAME	COLLINS, WALTER C.	100	1.2 NAMI				
STREET ADDRESS	312 SE 17TH STREET SUITE 3	800		ET ADDRESS			
CITY-ST-ZIP	FT LAUDERDALE, FL 00000	T DELETE	1.4 CITY-		·····	["] Change	Addition
TITLE	CTD	☐ DELETE	2.1 TITLE				
NAME	PALMER, CHARLES C.		2.2 NAM	1	. •		
STREET ADDRESS	2205 MIDDLE RIVER DRIVE		2.3 STRE	ET ADDRESS	•		
CITY-ST-ZIP	FT LAUDERDALE FL		2. 4 CITY			Change	Addition
TITLE	V	☐ DELETE	3.1 TITLE	ľ			
NAME	WILSON, JOY		3.2 NAM				
STREET ADDRESS	312 SE 17TH STREET SUITE 3	300		ET ADDRESS			
CITY-ST-ZIP	FT. LAUDERDALE FL.	C) point	3.4. CITY			☐ Change	☐ Addition
TITLE	8	☐ DELETE	4.1 TITLE				
NAME	MCCLOSKY, DONALD C.		4. 2 NAM				}
STREET ADDRESS				ET ADDRESS			
CITY-ST-ZIP	FT. LAUDERDALE, FL 0		4.4 CITY			☐ Change	Addition
TITLE	V	☐ DELETE	5.1 TITLE			L.J Criange	[] Addition
NAME	CANTRELL, WILLIAM G.		5.2 NAM				
STREET ADDRESS	312 SE 17TH STREET SUITE 3	300		ET ADDRESS	· ·		
CITY-ST-ZIP	FT. LAUDERDALE FL		5.4 CITY			Chara	☐ Addition
TITLE	AS	☐ DELETE	6.1 TITLE			☐ Change	∐ ∧odidon (
NAME	DRESSLER, SHARON K.		6.2 NAM				
STREET ADDRESS	312 SE 17TH STREET SUITE 3	300		ET ADDRESS			
CITY OF 710	ET LAHIDEDDALE EL		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 suppliemental 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.

SIGNATURE:

SIGNATURE AND TOPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-4-99 954-46

754-463-068