FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED

95 APR 19 AM 8:04

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 718143 (1)

1. Corporation Name

OCEAN CHATEAU OF VERO BEACH, INC.

Principal Place of Business	Mailing Address
4049 OCEAN DR VERO BCH FL 32963	4049 OCEAN DR VERO BCH FL 32963

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 04/03/1970
3a. Date of Last Report: 06/27/1994
4. FEI Number: 59-1320562 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ **$68.75** Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip / Country 24 / 25	Zip / Country 29 / 30

9. Name and Address of Current Registered Agent

ALLAN JUDITH D
4049 OCEAN DRIVE
VERO BEACH FL 32963

10. Name and Address of New Registered Agent

81 Name: ALLAN, JUDITH D
82 Street Address (P.O. Box Number is Not Acceptable): 4049 OCEAN DRIVE
83
84 City: VERO BEACH FL 85 Zip Code: 32963

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	Director ☐ Change ☒ Addition
NAME	JESTER, FRANK	1.2 NAME	PETERSON, Dena
STREET ADDRESS	4049 OCEAN DRIVE	1.3 STREET ADDRESS	4049 Ocean Drive
CITY-ST-ZIP	VERO BEACH FL	1.4 CITY-ST-ZIP	Vero Beach, FL 32963
TITLE	SD	2.1 TITLE	Treasurer ☐ Change ☒ Addition
NAME	DERKASH, HELEN	2.2 NAME	BOWEN, Craig
STREET ADDRESS	4049 OCEAN DRIVE	2.3 STREET ADDRESS	2907 Ocean Drive
CITY-ST-ZIP	VERO BEACH FL	2.4 CITY-ST-ZIP	Vero Beach, FL 32963
TITLE	PD	3.1 TITLE	☐ Change ☐ Addition
NAME	ALLAN, JUDITH D	3.2 NAME	
STREET ADDRESS	4049 OCEAN DR.	3.3 STREET ADDRESS	
CITY-ST-ZIP	VERO BCH, FL 00000	3.4 CITY-ST-ZIP	
TITLE	VD	4.1 TITLE	☐ Change ☐ Addition
NAME	TINSEY, FRED	4.2 NAME	
STREET ADDRESS	4049 OCEAN DR.	4.3 STREET ADDRESS	
CITY-ST-ZIP	VERO BCH, FL 00000	4.4 CITY-ST-ZIP	
TITLE	D	5.1 TITLE	☐ Change ☐ Addition
NAME	VOGEL, ARTHUR P	5.2 NAME	
STREET ADDRESS	4049 OCEAN DR.	5.3 STREET ADDRESS	
CITY-ST-ZIP	VERO BCH, FL 00000	5.4 CITY-ST-ZIP	
TITLE	D	6.1 TITLE	☐ Change ☐ Addition
NAME	CORBETT, JOHN	6.2 NAME	
STREET ADDRESS	4049 OCEAN DRIVE	6.3 STREET ADDRESS	
CITY-ST-ZIP	VERO BEACH FL	6.4 CITY-ST-ZIP	

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)(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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Judith D. Allan Judith D. Allan 3/15/95 407-231-2777
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0004004