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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

	1996 📉		DIVISION OF						
DOCUN Corporation	MENT # 849	9508	(7)						
•	CLOISTERS AT PINE I	ISLAND, INC.				# 188181 981H # 81218 (8121 B)	<b>48</b> (4) (4)) <b>4</b> (4)	1 <b>1.18</b> 16 <b>311</b> 11 <b>018</b>	11 <b>6   6   6   6   6   6   6   6   6   6 </b>
		A district							
incipal Place	of Business		g Address						
P O BOX 18			ATERFRONT DRIVE O BOX 1616						
PINELAND F			NELAND FL 33945			3. Date Incorporated or Qualific	d <b>3a.</b> Da	nte of Last Re	eport
						06/23/1981		04/21/19	995
Principal Pla	ice of Business	<b>├</b> ¬	ailing Address			4. FEI Number			Applied For
During Amil III	l ata	26	ite. Apt. #, etc.			59-2392370			Not Applicable  Additional
Suite, Apt. #	, etc.	27	ine, Apr. #, etc.			5. Certificate of Status Desired		,	Required
City & State	4.7	C	ity & State			6. Election Campaign Financing			<b>0</b> May Be
L. <u>-</u> -		28		Country		Trust Fund Contribution			d to Fees
Zip ]	Country 25	29 29	Р	Gountry 30		8. This corporation has liability to Florida Statutes	orintangibie ∕es ∐No	tax under s	199.032,
	9. Name and Address of		ed Agent	124)		10. Name and Address of Nev	v Registere	d Agent	
				81	Name				
	RPORATION SYSTEM			82	Street Ad	ddress (P.O. Box Number is Not Accep	table)		
	S. PINE ISLAND ROAD			83					
PLANTA	ATION FL 33324							T==T=	
				84	City		F	L 85 Z	ρ Code
1. Pursuant to	o the provisions of Sections 6	07.0502 and 607.1	508, Florida Statute	es, the above	named corp	poration submits this statement for the loard of directors. I hereby accept the a	purpose of c	changing its r	registered office
or registere familiar with	ed agent, or both, in the State h, and accept the obligations	of Florida. Such of of, Section 607.05	nange was authorize 05, Florida Statutes	ea by the corp ·	oracion s b	loard of directors, i hereby accept the a	рролипен	as registered	agent rain
GNATURE						, , , , , , , , , , , , , , , , , , , ,			
	Signature, typed or printed name of regist				nit Schlaffara fok	pina when related ig:  ADDITIONS/CHANGES TO C	DATE DEFICERS A	ND DIRECTO	PRS IN 12
2.	OFFICE	ered agent and tenif appl ERS AND DIRECTO		13.	rit Soprature rek	ADDITIONS/CHANGES TO C		ND DIRECTO	DRS IN 12
2. ILE	OFFICE <b>VP</b>		DRS	13.	nt signatura roo	ADDITIONS/CHANGES TO C			
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