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FILED
May 19 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # F06922 (1)

1. Corporation Name
SILVER SANDS OF INDIAN RIVER, INC.



Principal Place of Business
3033 RIVIERA DR
STE 201
NAPLES FL 33940-
US

Mailing Address
3033 RIVIERA DR
STE 201
NAPLES FL 34103-2750
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 28 Zip

24 Country 29 Country

25 Country 30 Country

9. Name and Address of Current Registered Agent

BUDD, DAVID G.
3033 RIVIERA DR.
STE 201
NAPLES FL 33940-

3. Date Incorporated or Qualified
11/25/1980

3a. Date of Last Report
04/12/1996

4. FEI Number
59-2153144

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

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

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL 85 Zip Code
34103

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, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE V ☐ DELETE

NAME BUDD, DAVID G.
STREET ADDRESS 3033 RIVIERA DR., STE. 201
CITY-ST-ZIP NAPLES FL

TITLE PD ☐ DELETE

NAME RUBIN, ALEX
STREET ADDRESS 3033 RIVIERA DR., STE. 201
CITY-ST-ZIP NAPLES FL

TITLE AS ☐ DELETE

NAME ZUCCARO, SHARON M.
STREET ADDRESS 3033 RIVIERA DR., STE. 201
CITY-ST-ZIP NAPLES FL

TITLE STD ☐ DELETE

NAME RUBIN, HARRY
STREET ADDRESS 3033 RIVIERA DR., STE. 201
CITY-ST-ZIP NAPLES FL

TITLE V ☐ DELETE

NAME RUBIN, BENJAMIN
STREET ADDRESS 3033 RIVIERA DR., STE. 201
CITY-ST-ZIP NAPLES FL

TITLE VAS ☐ DELETE

NAME RUBIN, LINDA
STREET ADDRESS 3033 RIVIERA DR., STE. 201
CITY-ST-ZIP NAPLES FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do 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 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.

SILVER SANDS OF INDIAN RIVER, INC.

SIGNATURE: BY: *[Signature]* DATE: 3/26/97

3/26/97

(941) 263-7700

SIGNATURE AND TYPE AND PRINTED NAME OF REGISTERED AGENT

Date

Daytime Phone #

CR2E034 (9/96)