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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT # F9500003299 (3)

FLORIDA DEVELOPMENT FUND (1995), INC.

FILED Apr 18 1997 8:00am Secretary of State



| Principal Place | e of Business | Mailing Addre | 985 | · | | | | | |
|---------------------------------------|--|------------------------------|---------------------|---|-------------------|--|-------------|----------------------------|-------------------------------|
| | .S. HIGHWAY ONE, SUITE 10 | | J.S. HIGHWAY ONE | . Sun | E 10 | | | | |
| | | | | | | 3. Date Incorporated or Qualifie 07/07/1995 | l l | Pate of Last I 106/1996 | Report |
| 2. Principal Pl 21 | lace of Business | 2a. Mailing Ad | ddress | | 7-1.11 | 4- FEt Number NOT APPLICABLE | | J | applied For lot Applicable |
| Suite, Apt | #, etc | Suite, Apt | . #, etc. | | | 5. Certificate of Status Desired | ₩ | | Additional |
| 22 | 27 | | | | | | | | Required |
| City & State 23 | e | 28 Cily & Sia | l U | | | 6. Election Campaign Financing Trust Fund Contribution | | | May Be I to Fees |
| Z _i p | Country Zip 25 29 30 | | | 8. This corporation has liability for Intangible tax under s. 199 Florida Statutes **XX** Yes \sum No | | | s. 199.032, | | |
| 24] | 9. Name and Address of Curre | | | T- | | 10. Name and Address of New | | | |
| COB | JURN, TERRY | | | 81 | Name | | ····· | | |
| 2729 SOUTH U.S. HIGHWAY ONE, SUITE 10 | | | | | Street Ad | dress (P.O. Box Number is Not Accep | table) | | |
| FOR | T PIERCE FL 34982 | | | 83 | ļ | | | | |
| | | | | | | | | | |
| | | | | 84 | City | | FL | 85 Zip | Code |
| 11. Pursuant office or r | to the provisions of Sections 607.05 | 02 and 607.1508, Fl | orida Statutes, the | abov | e-named co | rporation submits this statement for the | e purpose o | of changing | its registered |
| agent La | m familiar with, and accept the oblig | gations of, Section 6 | 07.0505, Florida S | statute | S. | ation's board of directors. I hereby ac | 0-p- | p 0,112.112.11 | |
| SIGNATURE | Signature, typed or puriled name of registered as | avol and title if apolicable | (NOTE: Begis) | lered An | ent signalure reg | guired when reinstating) | DATE | | |
| 12. | | ND DIRECTORS | | 3. | on signature res | ADDITIONS/CHANGES TO OF | | D DIRECTO | RS IN 12 |
| TITLE | CEOC | | DELETE 1. | 1 TITLE | | President | | Change | Addition |
| NAME | SHIROYAN, THOMAS H | ONE 01175 10 | 1: | 2 NAME | | R. Michael Mett | | | |
| STREET ADDRESS | 2729 SOUTH U.S. HIGHWAY | ONE, SUITE 10 | 1. | 3 STACE | ADDRESS | 2729 South U.S. 1 | lighwa | ay One | ,Stel0 |
| CITY+ST-7IP | FORT PIERCE FL 34982 SDT | | | 4 CITY- | ST-ZIP | Fort Pierce FL 3 | 1982 | Channe | 91 4200 |
| THE | COBURN, TERRY | | ' I | 1 TITLE | | Director | | Change Change | X Addition |
| NAME STREET ADDRESS | 2729 SOUTH U.S. HIGHWAY | ONE. SUITE 10 | 1 | 2 NAME | T ADDAESS | Claude Lemire | les i des | | |
| CITY-SI-ZIP | FORT PIERCE FL 34982 | 0.00, 00.00 | | 4 CITY | 67 76 I | 2729 South U.S.H. | | 7 One, | Ste 10 |
| Title | | | | 1 TITLE | <u></u> | Fort Pierce FL 3 | 1982- | ☐ Change | Addition |
| NAME | is a second of the second of t | | 3. | 2 NAME | | | | | |
| STREET ADDRESS | | | 3. | 3 STREE | T ADDRESS | | | | |
| CHY-S1-ZIP | | | | 4. CITY- | ST-ZIP | | | · | |
| TPLE | | L. | | 1 TITLE | ļ | | | L Change | Addition |
| NAME | | | | 2 NAME | | | | | |
| STREEL ADDRESS | | | | | T ADDRESS | | | | |
| CITY - S1 - ZIP TITLE | | | | 4 CITY- 1 TITLE | ST-ZIP | | | Change | Addition |
| NAME | | | 1 | 2 NAME | 1 | | | CT Sumings | |
| STREET ADDRESS | | | iii | | T ADDRESS | | | | |
| CITY-ST-ZIF | | | 1 | 4 CITY- | ĭ | | | | |
| TITLE | | | | 1 TITLE | - | | | ☐ Change | Addition |
| NAMÉ | | | 1 | 2 NAME | Í | | | | |
| STREET ADDRESS | | | 6. | 3 STAEE | ADDRESS | | | | |
| CITY - ST - 7IP | | | 6. | 4 CHY- | ST-ZIP | | | | |

14. If do hereby certify that the information supplied with this fiting 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

561-465-2017