

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Mar 01, 1999 8:00 am
Secretary of State

03-01-1999 90200 041 ***150.00

DOCUMENT # H02323

1. Corporation Name

PARK PLACE DEVELOPERS OF COCOA BEACH, INC.

Principal Place of Business

180 PINELLAS LN
COCOA BEACH FL 32931

Mailing Address

180 PINELLAS LN
COCOA BEACH FL 32931

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/07/1984

4. FEI Number

59-2434827

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 owes the current year intangible
Personal Property Tax. ☐ Yes ☒ No

2. Principal Place of Business

21 2210 S. Atlantic Avenue

2a. Mailing Address

26 2210 S. Atlantic Avenue

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

City & State

23 Cocoa Beach, FL

City & State

28 Cocoa Beach, FL

Zip

24 32931

Country

25 USA

Zip

29 32931

Country

30 USA

9. Name and Address of Current Registered Agent

SUNDIN, GLENN T
335 S PLUMOSA ST
STE A
MERRIT ISLAND FL 32952

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

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 PSD ☐ DELETE

NAME BAUGHER, ROBERT
STREET ADDRESS 180 PINELLAS LANE, SUITE 101
CITY-ST-ZIP COCOA BEACH FL 32931

TITLE ST ☐ DELETE

NAME DEBORAH L. KNIGHT
STREET ADDRESS 180 PINELLAS LANE
CITY-ST-ZIP COCOA BEACH FL 32931

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE President ☒ Change ☐ Addition

12 NAME ROBERT A. BAUGHER
13 STREET ADDRESS 2210 S. Atlantic Avenue
14 CITY-ST-ZIP COCOA BEACH, FL 32931

21 TITLE Sec/Treas ☒ Change ☐ Addition

22 NAME DEBORAH L. KNIGHT
23 STREET ADDRESS 2210 S. Atlantic Avenue
24 CITY-ST-ZIP COCOA BEACH, FL 32931

31 TITLE ☐ Change ☐ Addition

32 NAME
33 STREET ADDRESS
34 CITY-ST-ZIP

41 TITLE ☐ Change ☐ Addition

42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP

51 TITLE ☐ Change ☐ Addition

52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP

61 TITLE ☐ Change ☐ Addition

62 NAME
63 STREET ADDRESS
64 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 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, with all other like empowered.

SIGNATURE: Deborah L. Knight
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1/9/98 407-784-2318

0112333

CR2E034 (11/98)