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FILED
May 06 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 # H32549 (8)

1. Corporation Name

CAREFREE COVE DEVELOPMENT CORPORATION

Principal Place of Business

6400 CONGRESS AVE
SUITE #2000
BOCA RATON FL 33487-2810

Mailing Address

6400 CONGRESS AVE
SUITE #2000
BOCA RATON FL 33487-2810

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

30 Country

3. Date Incorporated or Qualified

12/04/1984

3a. Date of Last Report

04/25/1996

4. FEI Number

59-2483328

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

9. Name and Address of Current Registered Agent

FISK, DEBORAH L.
6400 CONGRESS AVENUE, SUITE 2000
BOCA RATON FL 33487

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 ☐ DELETE

NAME
VD
TERWILLIGER, J. RONALD
STREET ADDRESS
2859 PACES FERRY
CITY - ST - ZIP
ATLANTA GA

TITLE ☐ DELETE

NAME
PD
WHEELER, CHRIS
STREET ADDRESS
6400 CONGRESS AVE
CITY - ST - ZIP
BOCA RATON FL

TITLE ☐ DELETE

NAME
DV
CROW, HARLAN
STREET ADDRESS
2001 ROSS AVE., #3500
CITY - ST - ZIP
DALLAS TX

TITLE ☐ DELETE

NAME
VST
BRYANT, BRAD
STREET ADDRESS
6400 CONGRESS AVE
CITY - ST - ZIP
BOCA RATON FL

TITLE ☐ DELETE

NAME
AS
FISK, DEBORAH
STREET ADDRESS
6400 CONGRESS
CITY - ST - ZIP
BOCA RATON FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

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
VP
Tatehart, Greg
6400 Congress Ave
Boca Raton, FL 33487

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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/16/97

561/997-9700

CR2E034 (9/96)