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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Socretary of State DIVISION OF CORPORATIONS

DOCUMENT # H47710

(9)

THE WATERHOUSE, INC.

FILED									
Apr 24 1997 8:00am									
Secretary of State									

Principal Place of Business 491 BARRACUDA BLVD. PO BOX 2487 KEY LARGO FL 33037		Mailing Addre	ess			0 1004M11 M134 M1M11 40M11 10884 14W11 MB44 M1M11 W1M17 W1W11 M3044 M1M11 M1W12 10\$1				
		491 BARRACUDA BLVD. PO BOX 2487 KEY LARGO FL 33037-7487								
						3. Date Incorporated or Qualified 03/15/1985	3a. Date of 02/07/1		eport .	
2. Principal Pl	ace of Business	2a, Mailing Ac	dress			4. FEI Number		Ap	plied For	
21		26	26			59-2522267			t Applicable	
Suite, Apt.	#, etc.	Suite, Apt.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional			
22		27	- hh					Fee Re		
City & State	9	hq *	City & State			6. Election Campaign Financing	\$5.00 May Be			
23		28				Trust Fund Contribution	· · · · · · · · · · · · · · · · · · ·	Added t		
Zip	Country	Z(p		Country	'	8. This corporation has liability for in			199.032,	
24	25 9. Name and Address of Curre	29	30	L		Florida Statutes 10. Name and Address of New Reg	Yes No			
		ili negistered Agen	IL	81	Name	10. Name and Address of New Rej	jistered Ager	n .		
	RNBACH, BARBARA			"	INGING					
	BARRACUDA BLVD			82	Street Add	ress (P.O. Box Number is Not Acceptab	le)			
KEY	LARGO FL 33037			83						
				63						
				84	City		85	Zip C	Code	
					L ' ,		PL			
11. Pursuant I	to the provisions of Sections 607.05	02 and 607.1508, Fk	orida Statutes, i	the above	e-named corp	poration submits this statement for the pi tion's board of directors. I hereby accep	urpose of cha	nging its	s registered	
agent. I a	m familiar with, and accept the obli	gations of, Section 60	07.0505, Florida	a Statute	S.	morra board of directors. Thereby decep	т то арропи	iloni us	registored	
SIGNATURE										
	Signature, typed or printed name of registered at	The second of th	(NOTE Re	· · · · · · · · · · · · · · · · · · ·	int signature requ	ireo when reinstating)	DATE			
12.		VD DIRECTORS	DECETE	13.	T	ADDITIONS/CHANGES TO OFFIC				
TATLE	DP	LJ	DELFTE	1.1 TITLE				Change	☐ Addilion	
NAME .	DOERNBACH, BARBARA			1.2 NAME					Ì	
STREET ADDRESS	491 BARRACUDA BLVD.			1.3 STREET	ADDRESS				1	
CITY-ST-ZIP	KEY LARGO FL			1.4 CHY - S	51 - ZIP					
TITLE	D	L	DELFTE	2.1 10116		•		Change	Addition	
NAME	FRINK, STEPHEN			2.2 NAME					1	
STREET ADDRESS	491 BARRACUDA BLVD.			2.3 \$1REE1	ADDRESS					
CITY-ST-ZIP	KEY LARGO FL		D4 . P ==	2. 4 CITY-	S1 - 7/P					
TITLE		LJ	DELETE	3.1 TITLE				Change	☐ Addition	
NAME				3.2 NAME						
STREET ADDRESS				3.3 STREE 1	ADDRESS]	
CITY-ST-ZIP			DE LETE	3.4 CHY-	\$1 - ZIP					
TITLE		Ц	DELETE	4.1 TITLE				Change	Addition	
NAME				4. 2 NAME						
STREET ADDRESS				4.3 STREET	ADDRESS					
CITY-ST-ZIP			1.1.1.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2	4.4 CITY - S	51 - Z(P	MANUS PROFESSION OF STREET, ST				
TITLE		LJ	DELETE	5.1 TITLE				Change	Addition	
NAME				5.2 NAME						
STREET ADDRESS				5.3 STREET	ADDRESS				.	
CITY-ST-ZIP				5.4 CITY - 9	51 - ZIP					
TITLE			DELETE	6.1 TITLE				Change	☐ Addition	
NAME				6.2 NAME						
STREET ADDRESS				6.3 STREET	ADDRESS					
CITY-ST-ZIP				6.4 CITY - S	S1 - Z(P					

14. To 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 deliver 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 or attachment with an oddress.