

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

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 # H49277

(7)

1. Corporation Name

PLANTATION BAY UTILITY CO.



Principal Place of Business

100 PLANTATION BAY DRIVE  
ORMOND BEACH FL 32174

Mailing Address

100 PLANTATION BAY DRIVE  
ORMOND BEACH FL 32174

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

24

25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

29

30

3. Date Incorporated or Qualified

03/27/1985

3a. Date of Last Report

09/06/1996

4. FEI Number

59-2511975

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

HOSSEINI, MORI

~~1150 PELICAN BAY DRIVE~~  
DAYTONA BEACH FL 32119

10. Name and Address of New Registered Agent

81 Name

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

2359 BEVILLE ROAD

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]*

(NOTE: Registered Agent's signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D  
NAME LAZARE, FRANCOIS  
STREET ADDRESS ROUTE DE CHENE #5  
CITY-ST-ZIP 1207 GENEVA SW ☐ DELETE

TITLE VD  
NAME IRWIN, STEPHEN  
STREET ADDRESS 505 PARK AVE  
CITY-ST-ZIP NEW YORK NY ☐ DELETE

TITLE D  
NAME PIQUET, PAUL  
STREET ADDRESS 2 RUE JARGONNANT  
CITY-ST-ZIP 1211 GENEVA 6 SW ☐ DELETE

TITLE P  
NAME HOSSEINI, MORI  
STREET ADDRESS ~~1150 PELICAN BAY DR.~~  
CITY-ST-ZIP ~~DAYTONA BEACH FL~~ ☐ DELETE

TITLE ~~ST~~  
NAME ~~GALCHAK, DAVID~~  
STREET ADDRESS ~~100 NORTH LAKE DR.~~  
CITY-ST-ZIP ~~ORMOND BEACH FL~~ ☒ DELETE

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

2359 BEVILLE ROAD  
DAYTONA BEACH, FL 32119

5.1 TITLE ☐ Change ☒ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

JEAN TRINDER  
2359 BEVILLE ROAD  
DAYTONA BEACH, FL 32119

6.1 TITLE ☐ Change ☒ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

DOUGLAS ROSS  
2359 BEVILLE ROAD  
DAYTONA BEACH, FL 32119

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 address.

SIGNATURE

*[Signature]*

4/25/97

04-288-1560

CR2E034 (9/96)