

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # J39286

(6)

1. Corporation Name

OUTDOOR LIVING, INC.



Principal Place of Business

1529 N. OLD DIXIE HWY
JUPITER FL 33469

Mailing Address

1529 N. OLD DIXIE HWY
JUPITER FL 33469

2. Principal Place of Business

21 State, Apt., #, etc.

22 City & State

23 Zip

Country

24

2a. Mailing Address

26 State, Apt., #, etc.

27 City & State

28 Zip

Country

29

30

9. Name and Address of Current Registered Agent

HOLDEN, BRIAN
1529 N. OLD DIXIE HWY
JUPITER FL 33469

81 Name

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

83

84 City

FL

85 Zip Code

3. Date Incorporated or Qualified

10/23/1986

3a. Date of Last Report

06/28/1995

4. FEI Number

59-2725695

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032
Florida Statutes ☐ Yes ☐ No

10. Name and Address of New Registered Agent

SIGNATURE

12. OFFICERS AND DIRECTORS

TITLE

DP

☐ DELETE

NAME

HOLDEN, BRIAN

STREET ADDRESS

1529 N. OLD DIXIE HWY

CITY- ST- ZIP

JUPITER FL

TITLE

VST

☐ DELETE

NAME

HOLDEN, FLORENCE M.

STREET ADDRESS

1529 N. OLD DIXIE HWY

CITY- ST- ZIP

JUPITER FL

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

1. TITLE

2. NAME

3. STREET ADDRESS

4. CITY- ST- ZIP

5. TITLE

6. NAME

7. STREET ADDRESS

8. CITY- ST- ZIP

9. TITLE

10. NAME

11. STREET ADDRESS

12. CITY- ST- ZIP

13. TITLE

14. NAME

15. STREET ADDRESS

16. CITY- ST- ZIP

17. TITLE

18. NAME

19. STREET ADDRESS

20. CITY- ST- ZIP

21. TITLE

22. NAME

23. STREET ADDRESS

24. CITY- ST- ZIP

14. I do hereby certify that the information shown on this form is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(4)(c), Florida Statutes. I further certify that the information is based on this annual report or supplier data annual report is true and accurate and that my signing 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 is blank if no change with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

BRIAN J. HOLDEN

2/28/96 (607) 44-5166

CR2E034 (12/95)