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

PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

FILED Jan 23 1998 8:00am Secretary of State

1	MENT # J4432 VIEW ISLAND DEVELOPM				
Principal Plac	ce of Business	Mailing Address	· · · · · · · · · · · · · · · · · · ·		INTERNITORIA DI DI CITA DI CIT
1208 S MYRTLE AVENUE 1212 S. MYRTLE AVE. CLEARWATER FL 34616		1208 S. MYRTLE AVENUE CLEARWATER FL 34616 US		DO NOT WRITE IN THI	S SPACE
US				3. Date Incorporated or Qualified	
				11/26/1986	
2. Principal Place of Business 2		2a. Mailing Address		4. FEI Number	Applied For
21 26		26		59-2763414	Not Applicable
Sulte, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23 Zip	Country	28		Trust Fund Contribution	Added to Fees
24 24	Country 25	Zip 29	Country 30	8. This corporation owes or has paid the c Personal Property Tax due June 30.	☐ Yes ☐ No
e, Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent	
DIND, NOBERT W.			81 Name		
1208 S. MYRTLE AVENUE			82 Street A	ddress (P.O. Box Number is Not Acceptable)	
CLEARWATER FL 34616			raal		
			83		
			84 City	F	85 Zip Code
	to the provisions of Sections 607.0 registered agent, or both, in the Starm familiar with, and accept the ob-	502 and 607.1508, Florida Statut ite of Florida. Such change was a ligations of, Section 607.0505, Fit	es, the above-named cauthorized by the corporida Statutes.	orporation submits this statement for the purpose oration's board of directors. I hereby accept the ap	of changing its registered oppointment as registered
SIGNATURE	Signature, typed or printed name of registered	agent and title if applicable (NOT	E: Registered Agent signature re	equited when reinstating) DATE	
12.		AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AN	ND DIRECTORS IN 12
TITLE	VST	☐ DELETE	1.1 TITLE		Change Addition
NAME	BYRD, ROBERT W.		1.2 NAME		
STREET ADDRESS	1208 S. MYRTLE AVE		1.3 STREET ADDRESS		
CITY-ST-ZIP	CLEARWATER FL		1.4 CITY - ST - ZIP		
TITLE	PD	☐ DELETE	2.1 TiTL€		Change Addition
NAME	JUENGLING, CHARLES		2.2 NAME		
STREET ADORESS	1208 S. MYRTLE AVE		2.3 STREFT ADDRESS		
CITY-ST-ZIP	CLEARWATER FL	Document	2.4 CITY - ST - ZIP		
TITLE		☐ DELETE	31 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELFTE	3.4. CITY - ST - ZIP 4.1 TillE		☐ Change ☐ Addition
NAME			4. 2 NAME		Change Addition
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		1
TITLE		DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5 3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	61 TITLE		Change Addition
NAME			6.2 NAME		1
STREET ADDRESS			6.3 STREET ADDRESS		İ
CITY-ST-ZIP			6.4 CITY-S1-ZIP		
	ertify that the information complied	with the filing does not qualify to		in Section 110 07/3/(i) Florida Statutes Lifurther of	and the state of t

ies not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in a produces. indicated on this annual report or supplemental annual officer or director of the corporation or the resolver of Block 12 or Block 13 if the pool of the product of the corporation of the resolver of Block 12 or Block 13 if the pool of the corporation of the co