

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

FILED

May 05 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		 FLORIDA DEPARTMENT OF STATE Sandra S. Northam Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # J46319 1. Corporation Name PEARL APARTMENTS, INC.			
Principal Place of Business 4949 E. Anna-Jo Dr. Inverness, FL 34452		Mailing Address 4949 E. Anna-Jo Dr. Inverness, FL 34452	
2. Principal Place of Business 21 State Apt. #, etc. 22 City & State 23 Zip 24 Country		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country	
3. Date Incorporated or Qualified 12-5-86		3a. Date of Last Report 5-1-96	
4. FEI Number 59-2763467		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 Laval Rancourt 6020 E. Tenison St. Inverness, FL 34452		10. Name and Address of New Registered Agent 81 Name Pauline L. Rancourt 82 Street Address (R.O. Box Number is Not Acceptable) 6020 E. Tenison St. 83 City Inverness 84 State FL 85 Zip 34452	
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 <i>Pauline L. Rancourt</i> DATE 4-23-97			
12. OFFICERS AND DIRECTORS 12.1 TITLE PD ☒ DELETE 12.2 NAME Laval Rancourt 12.3 STREET ADDRESS 6020 E. Tenison St. 12.4 CITY-STATE-ZIP Inverness, FL 34452 12.5 TITLE SD ☒ DELETE 12.6 NAME Pauline L. Rancourt 12.7 STREET ADDRESS 6020 E. Tenison St. 12.8 CITY-STATE-ZIP Inverness, FL 34452 12.9 TITLE D ☐ DELETE 12.10 NAME Daniel Rancourt 12.11 STREET ADDRESS Rt. 114 12.12 CITY-STATE-ZIP Canaan, Vt. 12.13 TITLE ☐ DELETE 12.14 NAME 12.15 STREET ADDRESS 12.16 CITY-STATE-ZIP 12.17 TITLE ☐ DELETE 12.18 NAME 12.19 STREET ADDRESS 12.20 CITY-STATE-ZIP		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13.1 TITLE PTM ☒ Change ☐ Addition 13.2 NAME Pauline L. Rancourt 13.3 STREET ADDRESS 6020 E. Tenison St. 13.4 CITY-STATE-ZIP Inverness, FL 34452 13.5 TITLE VD ☐ Change ☒ Addition 13.6 NAME Jane McBride 13.7 STREET ADDRESS 540 Gentian Road 13.8 CITY-STATE-ZIP St. Augustine, FL 32086 13.9 TITLE S/VT/D ☐ Change ☒ Addition 13.10 NAME Virginia Rancourt 13.11 STREET ADDRESS 1309 Elwell Drive 13.12 CITY-STATE-ZIP Tallahassee, FL 32303 13.13 TITLE ☐ Change ☐ Addition 13.14 NAME 13.15 STREET ADDRESS 13.16 CITY-STATE-ZIP 13.17 TITLE ☐ Change ☐ Addition 13.18 NAME 13.19 STREET ADDRESS 13.20 CITY-STATE-ZIP	
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: PAULINE L. RANCOURT <i>Pauline L. Rancourt</i> DATE 4-23-97 352-344-5519 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			

CR2E034 (9/96)