SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT # 1. Corporation Name

K09818

(1)

PRESTIGE PROPERTY MANAGEMENT OF MARTIN COUNTY, I NC.

FILED Jul 30 1996 8:00 am Secretary of State



Principal Place of Business Mailing Address							
3125 SW MAPP ROAD 3125 SW MAI P.O. BOX 3385 P.O. BOX 338 STUART FL 34995-0985 STUART FL 3			385				
STUART PE 34	4385-U365	STUART FL 34995-03	385		3. Date Incorporated or Qualified	3a. Date of Last Report	
• • • • • •			v.v. (r · · · · · · · · · · · · · · · · · ·		12/30/1987	03/10/1995	
	ace of Business	2a. Mailing Address			4. FEI Number	Applied for	
21 26 Suite, Apt #, etc		Cuito Ant # oto	Suite, Apt. #, etc		65-0020635		
22	#, GIO	27		5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State		City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
	Country	Zιρ	Countr	У	8. This corporation has liability for		
:4	25 9. Name and Address of Curre	29 and 5 and 5	30		Florida Statutes	Yes No	
		ent Registered Agent	81	i Name _	10. Name and Address of New Re	egistered Agent	
RIZZUTI, JOSEPH R.				Robert Penkasa Jr.			
	:5 SW MAPP RD .M CITY FL 34990		83	3/25	ress (P.O. Box Number is Not Acceptal SW MAPP RD.	ole)	
			84	City PAL	AA AIPU	FL 85 Zip Code 34916	
11 Durament	to the group of Seatons 507.00	00 and 007 1500 Flands Ct	in los this obs	_ <i></i>	M CITY	FL 34990	
SIGNATURE	egistered agent, or both in the Statem tamiliar with, and accept the obli-	ee b	as authorized by 5, Florida Statute:		oration submits this statement for the poor's board of directors. I hereby accept	t the appointment as registered	
12.		NO DIRECTORS	13.	princis graniani, recipi	ADDITIONS/CHANGES TO OFFI	CERS AND DIRECTORS IN 12	
TITLE	DP	X DELETE	1 1 TI*LE		PRESIDENT - DIRECTOR	Change 🔀 Addition	
NAME	rizzuti, joseph r.		1.2 NAME		SIAGIO MENTO		
STREET ADDRESS	3125 SW MAPP RD		1 3 STREE		650 S. OCKAN OR. #1	W ?	
CITY - ST - ZIP	PALM CITY FL		1.4 CITY -			39457	
TITLE	VPD	DELETE	2 1 TITLE	7	RENGUARN SEORETARY - DIR	Change A Addition	
NAME	CADREAU, GORDON		2 2 NAME	R	OBERT PENROSE JR	•••	
STREET ADDRESS	3236 SE ASTOR LANE		2.3.STREE		500 S. OCBAN DR. #50) 1	
CiTY-ST-ZIP	STUART FL		2 4 CITY	ST-ZIP	ENSON BEACH PL 8	14457	
TITLE		DELETE	31 DTLE		ire 6104	Change Addition	
NAME			3 2 NAME	1	ARPL MARTINO		
STREET ADDRESS			3 3 STREE	_	33 SEMUVOLE AD		
CITY - ST - ZIP		1 60.60	3.4 CIRY	·ST-ZIP	NM BEALH FL		
Tille		DELETE				Change Addition	
NAME ADDRESS			4 2 NAME				
STREET ADDRESS				TADDRESS			
CITY-ST-ZIP TITLE		DELETE	4 4 Cilly - 5 1 Tible	ST-ZIP		Change Addison	
NAME		L Detter				Change Addition	
STREET ADDRESS			, 5 2 NAME				
CITY - ST - ZIP				T AUDRESS			
TITLE		DELETE	5 4 CHY - 6 1 TITLE	21 ZII,		Change Addition	
NAME		Occili	£ 2 NAME			L Onlings Addition	
STREET ADDRESS				TADORESS			
CITY-ST-ZIP	w cartify that the information cured	and with the films in valuator	64 CITY-		tily for the examption stated in Section	110.07/20/13 51	

I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119 07(3)(k). 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 trie 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address

GNATURE:

ROBERT

**R

SIGNATURE,