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FILED

Feb 14 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 # K77210 (8)

1. Corporation Name  
CRESCENT VIEW BEACH CLUB, INC.

Principal Place of Business

% BILL MERRILL, III  
2033 MAIN ST., #800  
SARASOTA FL 34237

Mailing Address

% BILL MERRILL, III  
2033 MAIN ST., #800  
SARASOTA FL 34237-6091

3. Date Incorporated or Qualified  
04/03/1989

3a. Date of Last Report  
03/13/1996

2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

4. FEI Number

65-0109943

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

MERRILL, WILLIAM W., III  
2033 MAIN STREET, SUITE 600  
SARASOTA FL 34237

10. Name and Address of New Registered Agent

81 Name

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

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

GERALD R MEWHIRTER

FEB 6/97

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE DP ☐ DELETE

NAME MEWHIRTER, GERALD R.  
STREET ADDRESS 672 BRUSHGROVE  
CITY-ST-ZIP AURORA ON

TITLE DT ☐ DELETE

NAME KERSHAW, JOHN P.  
STREET ADDRESS 24 SOLWAY CT  
CITY-ST-ZIP AGINCOURT, ONTARIO

TITLE DS ☐ DELETE

NAME WALTER, PETER M.  
STREET ADDRESS RURAL ROUTE 1  
CITY-ST-ZIP SCHOMBERG, ONTARIO

TITLE D ☐ DELETE

NAME MEWHIRTER, KEVIN PAUL  
STREET ADDRESS 672 BRUSHGROVE  
CITY-ST-ZIP AURORA ON

TITLE D ☐ DELETE

NAME THORPE, RICHARD J.  
STREET ADDRESS 42 MORGANDALE CRESCENT  
CITY-ST-ZIP AGINCOURT, ONTARIO

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

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

DS  
Walter, Peter M.  
Rural Route 1 Meadowlark  
Schomberg Ontario

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

FEB 6/97 905-8414117

CR2E034 (9/96)