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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Socretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(0)

THE ORMOND GREEN DEVELOPMENT, INC.

FILED Apr 21 1998 8:00am Secretary of State



Principal Plac	a of Punipour	Molling Address				uiti:	
Principal Place of Business Mailing Address 17 BROAD RIVER P.O. BOX 730086							
	NCH FL 32174	P.O. BOX 730086 ORMOND REACH EL 32	ORMOND BEACH FL 32173				
US		US			DO NOT WRITE IN THIS SPACE		
]					3. Date Incorporated or Qualified		
					11/06/1989		
2. Principal Place of Business 21		2a. Mailing Address			4, FEI Number	Applied For	
		26	to be a first the contract of		59-2982828	Not Applicat	olc
Suite, Apt. #, etc.		Suite, Apt. #, etc. 27			5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State		City & State	<u></u> †**i		6. Election Campaign Financing \$5.00 May Be		- 1
23 Zip			Country		Trust Fund Contribution	Added to Fees	
_	Country	1 1	·, ⊢-,		8. This corporation owes or has paid the cur		
24		25 29 30 sme and Address of Current Registered Agent			Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent		
НО	LUB, PAUL F., JR.	THE PROPERTY OF THE PARTY OF TH	В	1 Name	10, Name and Address of New Registered	- tyont	
17 BROADRIVER							
	MOND BEACH, FL 32174		8	2 Street Add	dress (P.O. Box Number is Not Acceptable)		
	MOND DEACH, 1 C 02174		8	3		· · · · · · · · · · · · · · · · · · ·	
]			ĺ
			8	4 City	FL	85 Zip Code	
11. Pursuant	to the provisions of Sections 607.05	02 and 607.1508, Florida Statu	ites, the abo	ve-named cor		changing its registere	od
office or r agent I a	egistered agent, or both in the Stat ni familiar with, and accept the obli	te of Florida. Such change was gations — Cition 607,0505. F	authorized I lorida Statut	by the corpora	poration submits this statement for the purpose of alion's board of directors. I hereby accept the app	ointment as registered	
SIGNATURE	()	Kunt	PA-UL	F. H	6/16 /-/6	-98	
			Th: Registered A	gent signature requ	· · · · · · · · · · · · · · · · · · ·		F
12.	OFFICERS A	NO DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND		è
TITLE	HOLUB, PAUL F., JR.	L'1 rutte it	1111111			Change Addition	on 2
NAME	17 BROAD RIVER		1.2 NAME				5
STREET ADDRESS	ORMOND BEACH FL		1	ET ADDRESS			یزا
CATY-ST-ZIP TITLE	n D	DELETE	1.4 C/TY- 2.1 TITLE			Change Addition	\è
NAME	FERNANDEZ, RICHARD		2 ? NAME			C change C Addition	"
STREET ADDRESS	3 TIDEWATER DR			E1 ADDRESS			
CITY-ST-ZIP	ORMOND BEACH FL		2. 4 City				
TITLE	D	DELETE	3.1 TILE			☐ Change ☐ Addition	on i
NAME	COLLINS, ROBERT	\nearrow	3.2 NAME				
STREET ADDRESS	1514 POPLAR	,		FT ADDRESS			
CITY-ST-ZIP	ORMOND BEACH FL		3.4. CITY				
TITLE		DELETE	4.1 TITLE			Change Addition	n n
NAME			4. 2 NAM	г			
STREET ADDRESS			4 3 STREE	E1 ADDRESS			
CITY-ST-ZIP			4.4 CITY-	-ST-7IP			
TITLE		DETETE	5.1 TITLE			Change Addition	n
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREE	ET ADDRESS			
CITY-ST-ZIP		<u></u>	5.4 CHY-	ST - Z(F			[
TITLE		DECETE	6.1 TiTLF			Change Addition	'n
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREE	ET ADDRESS			
CITY-ST-ZIP			6.4 C(1Y-	ST-ZIP		•	_

Thereby certify that the information supplied with this ming does not quality for the exemption stated in declaration to the following the information supplied with this ming above not quality or the corporation of supplemental around report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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 attact ment with an address.