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

PROFIT CORPORATION **ANNUAL REPORT**

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **L48244**

1. Corporation Name

BOARDWALK OF VERO, INC.

incipal Flace of Business	Mailing Address
B BEACHLAND BLVD	756 BEACHLAND BLVD
RO BEACH FL 32963-8745	VERO BEACH FL 32963-6:745

FILED Apr 27, 1999 8:00 am Secretary of State

04-27-1999 90052 006 ***150.00



Principal Flac	e of Business	Mailing Address	_		1 10011011 611 01001 10110 11011 011	11 ELE - BIE II BI	.,, elett 61811 B	19-1 41511 1451
756 BEACHLAN	ID BLVD	756 BEACHLAND BLVD						
VERO BEACH		VERO BEACH FL 32963-8745		DO NOT WRITE IN THIS SPACE				
					3. Date Incorporated or Qualifed			
					02/07/1990			
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number		Арі	plied For
21		26	_		65-0173171			Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certifcate of Status Desired		\$8.75 A Fee Re	
City & Stat	e	City & State			6. Election Campaign Financing	 []	\$5.00	vlay Be
23		28			Trust Fund Contribution		Added to	Fees
Zip	Country	Zip	Country	у	8. This corporation owes the curr	ent year inta	ingible	- 7
24		29	30		Personal Property Tax.			□No
	9. Name and Address of Curre	n: Registered Agent			10. Name and Address of New F	egistered A	Agent	
001	LINE CEODOS O 10		81	Name				
	Lins, George G., Jr Beachland Blvd		82	Street Add	ress (P.O. Bo:: Number is Not Accepta	ble)		
VER	O BEACH FL 32963		83	3				
			84	1 City			85 Zip C	ode
				<u> </u>		<u> </u>		
office or r	to the provisions of Sections 607.050 egistered agent, or both, in the State im familiar with, and ascept the obliga	of Florida. Such change was :	authorized by	/ the corporati	poration submits this statement for the ion's board of directors. I hereby accept	t the appoin	tment as reç	istered
SIGNATURE								
ļ	Signature, typed or printed no me of registered age			ent signature req in	ed when reinstating)	DATE AN	D DIRECTO	DC IM 12
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OF	-ICERS AN	☐ Change	Addition
TITLE	PD	☐ OFFETE	1.1 TITLE				□ Onlinge	
NAME	HAVRON, MARY C.		12 NAME					
STREET ADDRESS				ET ADDRESS				
CITY-ST-ZIP	VERO BEACH FL	O DELETE	1.4 CITY-3	ST-ZIP			Change	Addition
TITLE		☐ DELETE	2.1 TITLE				Change	☐ Addition
NAME			2.2 NAMÉ					
STREET ADDRESS			2.3 STREE	ET ADDRESS				
CITY-\$T-ZIP			2. 4 CITY-	ST-ZIP				Addition
TITLE		☐ DELETE	3.1 TITLE				Change	Addition
NAME			3.2 NAME	\				
STREET ADDRESS			33\$TREE	ET ADDRESS				
CITY-ST-ZIP			34 CITY-				Character	
TITLE		☐ DELETE	4.1 TITLE				Change	Addition
NAME			4.2 NAME					
STREET ADDRESS			4.3 STREE	ET ADDRESS				
CITY-ST-ZIP			4.4 CITY-					
TITLE		☐ DELETE	5.1 TITLE				Change	Addition
NAME			52 NAME					
STREET ADDRESS				ET ADDRESS				
CITY-ST-ZIP			5 4 CITY-					
TITLE		☐ DELETE	6.1 TIπLE				Change	☐ Addition
NAME			62 NAME					
STREET ADDRESS)		6.3 STREE	ET ADDRESS				
	1		64 CITY	ST. 7/D				i

14. Thereby certify that the informal ion supplied with this filing does not qualify for the exemption stated in Section 119.07 (3)(i), Florida Statutes. I further certify that the informal ion supplied with this filing does not qualify for the exemption stated in Section 119.07 (3)(i), Florida Statutes. I further certify that the informal ion 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 2 or Block 13 if changed, or on an attact ment with an address, with all other like empowered.

SIGNATURE: