FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT # L75731 (4) OCEANFRONT CONDOMINIUM DEVELOPMENT CORPORATION Principal Place of Business Mailing Address						
					3. Date Incorporated or Qualified 3a. Date of Last Report 05/24/1990 04/19/1995	
2. Principal Place of Business		2a. Mailing Address			4. FE: Number Applied For	
Suite, Apt. #	# etc	Suite, Apt. #, etc.			59-3012369 Not Applicab	
22	,, 0.0	27			5. Certificate of Status Desired \$8.75 Additional Fee Required	
City & State	,	City & State			6. Election Campaign Financing S5.00 May Be Trust Fund Contribution Added to Fees	
Zip 24	Country 25	<i>Ζ</i> φ	Country 30	/	This corporation has liability for intangible tax under s 199.032, Florida Statutes	
	9. Name and Address of Curr	ent Registered Agent		r	10. Name and Address of New Registered Agent	
	4 52 542 M		81	Name	3	
MCCULLY, W.E. 1503 W SMITH ST ORLANDO FL 32804			82	Street	t Address (P.O. Box Number is Not Acceptable)	
0110111	DO 12 02007		84	0.		
					FL 85 Zip Code	
or registere familiar with SIGNATURE	ed agent, or both, in the State of Fig h, and accept the obligations of Se Spance type for protoconnect registers Lag	onda, Such change was authorization 607.0505, Florida Statutes	red by the corp s	oration's	corporation submits this statement for the purpose of changing its registered offi is board of directors. Thereby accept the appointment as registered agent. I am	
12.		ND D-RECTORS	13.	" Sima" ne i	Property when no stating DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	☐ DELETE	1 1 TITLE		Change Addition	
NAME	MCCULLY, W E	12				
STREET ADDRESS	1503 W SMITH ST		13 STREET	ACDRESS		
CITY-ST ZIP TITLE	ORLANDO FL D	☐ DELETE	14 0/17 - 5	31 - 719		
NAME	MCCULLY, DAVID		2 1 THILE 22 NAME		Change Addit on	
STREET ADDRESS	1503 W SMITH ST		2.3 STREET	ADDRESS		
CITY-ST-ZIP	ORLANDO FL		2.4 CITY - S			
TITLE	D	DELETE	3 1 TIFLE		Change Addition	
NAME	MCCULLY, WALTER		3.2 NAME			
STREET ADDRESS	1503 W SMITH ST		3.3 STREE		\$	
C-TY - ST - ZIP T-TLE	ORLANDO FL	DELETE	3.4 City - 9	1 - ZIF	□ ○ ○ ○ ○ ○ ○ ○	
NAME	D DOE WALLANDE		4 1 TiTLE		Change	
STREET ADDRESS	ROE, WILLIAM E 429 E THIRD AVE		4.2 NAME 4.3 STREET	Africacco	3500 S ATLANTER AVENUE	
CITY - ST - ZIP	NEW SMYRNA FL		4 4 CITY - S		200 2 Mediant Menat	
ΤΙΤΙΕ	- AMILY WILLIAM	DELETE	5 1 TITLE		☐ Change ☐ Addition	
NAME			5.2 NAME			
STREET ADDRESS			5 3 5 1866 I	ADDRESS		
CITY - ST - ZIF			5.4 CITY - S	11- ZIP		
TITLE		DELETE	6 1 Ti₹LE		Change Addition	
NAME STOCKE ADDRESS			6.2 NAME			
STREET ADDRESS CITY-ST-ZIP			5 3 STHEE!			
	certify that the information supplies	of with this fling is voluntarily furn	54 0ity - S hished and doe		Latify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further	

soft or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under nor trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name aryument with an address. certify that the information indicated on this annuar oath; that I am an official or director of the corpolatic appears in Block 12 or Block 13 if changes or dig.

SIGNATURE: AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Pricing #