

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

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
Mar 13 1997 8:00am
Secretary of State

DOCUMENT # M83718 (0)

1. Corporation Name
OCEAN HARBOUR OF ISLAMORADA, INC.

Principal Place of Business

P.O. BOX 840
TAVERNIER FL 33070

Mailing Address

P.O. BOX 840
TAVERNIER FL 33070-0840



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

30 Country

3. Date Incorporated or Qualified
05/31/1988

3a. Date of Last Report
02/14/1996

4. FEI Number
65-0055339

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

JOHNSON, DERRETH
87851 OLD HWY P-4
ISLAMORADA FL 33036

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 607.062 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 obligation of, Section 607.0505, Florida Statutes.

SIGNATURE

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 ☐ DELETE

NAME JOHNSON, DERRETH
STREET ADDRESS 87851 OLD HIGHWAY P-4
CITY-ST-ZIP ISLAMORADA FL

TITLE ☐ DELETE

NAME MIRMELLI, STEVEN
STREET ADDRESS 370 STIRRUP KEY BLVD.
CITY-ST-ZIP MARATHON FL

TITLE ☐ DELETE

NAME HARRIS, KEITH A.
STREET ADDRESS 88181 OLD HWY UNT H1
CITY-ST-ZIP ISLAMORADA FL

TITLE ☐ DELETE

NAME ZIMMERMAN, BRIAN
STREET ADDRESS 6023 NORTH 35TH STREET
CITY-ST-ZIP MILWAUKEE WI

TITLE ☐ DELETE

NAME LONG, RAYMOND V.
STREET ADDRESS 205 OCEAN DR
CITY-ST-ZIP TAVERNIER FL

TITLE ☐ DELETE

NAME HARRIS, L.E.
STREET ADDRESS 87851 OLD HWY UT #P-41
CITY-ST-ZIP ISLAMORADA FL

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

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

Vincent A. Johnson

Vincent A. Johnson

3-6-97 305852-745T

CR2E034 (9/96)