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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # M88576

(7)

FILED									
Jan 29 1997	8:00am								
Secretary o	of State								

CORAL POOLS OF OCEAN REEF, INC.							 					
Principal Place of Business Mailing Address					-	7	- T I SERVERIO TOLI COLON CONDA DANNA LARGOR BATAN BADAN BADAN BADAN BADAN BADAN DADAN ARBA					
8 BARRACUDA LANE COEAN REEF CLUB KEY LARGO FL 33037 6 BARRACUDA LANE COEAN REEF CLUB KEY LARGO FL 33037 KEY LARGO FL 33037												
					ı.	Date Incorporated or Qualified 06/27/1988	alified 3a. Date of Last Report 02/27/1996					
2. Principal Pl	ace of Business	2a. Mailing Add	2a. Mailing Address				FEI Number			Applied For		
21		26				65-0064357			Not Applicable			
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5.	Certificate of Status Desired	X		75 Additional e Required		
City & State		City & State			6.	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees					
Zip 24	Country 25	Ζφ 29	30	intry		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No						
9. Name and Address of Current Registered Agent				<u> </u>		10. Name and Address of New Registered Agent						
MITC	HELL, GREGORY L.			81	Name							
6 BARRACUDA LANE OCEAN REEF CLUB			82	Street Addre	Address (P.O. Box Number is Not Acceptable)							
	TH KEY LARGO FL 33037			83								
				84	City			FL	8 5	Zip Code		
office or re	o the provisions of Sections 607.0 egistered agent, or both, in the Sta n familiar with, and accept the obl	ite of Florida. Such char	nge was authorize	d by	the corporati	oratio ion's t	n submits this statement for the proposed of directors. I hereby accept	urpose of the ap	of changing pointmen	ng its registered t as registered		

SIGNATURE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if appricable. DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. ☐ Change ☐ Addition TITLE ☐ DELE1E 1,1 TITLE MITCHELL, GREGORY L. NAME 1.2 NAME **6 BARRACUDA LANE** STREET ADDRESS 1.3 STREET ADDRESS N KEY LARGO FL CITY-ST-ZIP 1,4 CITY-ST-ZIP DELETE Change ☐ Addition TITLE STD 2.1 TITLE MITCHELL, PAMELA J. NAME 2 2 NAME **6 BARRACUDA LANE** STREET ADDRESS 23 STREET ADDRESS N KEY LARGO FL CITY-ST-ZIP 2 4 CHTY - ST - ZIP DELETE Change Addition TITLE 3.1 TI!LE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4 CITY - ST - ZIP DELETE Addition TITLE 4.1 TITLE ☐ Change NAME 4, 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZiP 4.4 C!TY - ST - ZiP ☐ DELET€ TITLE 5.1 Till E Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 54 CITY - ST - ZIP DELETE Change Addition TITLE 61 IPLE NAME 62 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY - ST- ZIP 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 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 attachment with an address

SIGNATURE: tous of the Out

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