

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # M90323

(0)

1. Corporation Name

OCEAN RIDGE ESTATES, INC.



Principal Place of Business

1321 PARTRIDGE PL NO
BOYNTON BEACH FL 33436
US

Mailing Address

1321 PARTRIDGE PL NO
BOYNTON BEACH FL 33436
US

2. Principal Place of Business

2a. Mailing Address

21 2900 High Ridge Road

26 2900 High Ridge Road

22 Suite, Apt. #, etc.
City & State

27 Suite, Apt. #, etc.
City & State

23 Boynton Beach, FL

28 Boynton Beach, FL

24 Zip

25 Country

29 Zip

30 Country

33436

U.S.A.

33436

U.S.A.

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

07/06/1988

3a. Date of Last Report

06/12/1995

4. FEI Number

65-0062306

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

10. Name and Address of New Registered Agent

81 Name

Fender, T.D.

82 Street Address (P.O. Box Number is Not Acceptable)

2900 High Ridge Road

84 City

Boynton Beach

FL

85 Zip Code

33436

11. Pursuant to the provisions of Sections 607.0502 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. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and the corporation

NOTE: Registered Agent signature required when changing registered office

DATE

12. OFFICERS AND DIRECTORS

TITLE D
NAME FENDER, T. D.
STREET ADDRESS 1321 PARTRIDGE PLACE N.
CITY-ST-ZIP BOYNTON BCH. FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE D
NAME Fender, T.D.
STREET ADDRESS 2900 High Ridge Road
CITY-ST-ZIP Boynton Beach, FL 33436

2. TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

3. TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

4. TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

5. TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

6. TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

Daytime Phone #

CR2E034 (12/95)