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

**PROFIT CORPORATION ANNUAL REPORT** 

1998



FLORIDA DE PARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(5)

PENAN DEVELOPMENT CORP.

## **FILED** Feb 09 1998 8:00am Secretary of State

Principal Place of Business Mailing Address							ARI GARII BIBI		1 D DII 1001
224 GLENNWOOD DR. THE HAMLET DELRAY BEACH FL 33445		224 GLENNWOOD DR. THE HAMLET			DO NOT WRIT	E IN THIS	SPACE		
DELKAT BEAG	OH FL 33445	DELRAY BEACH FL 33445				3. Date Incorporated or Qualified			
						07/25/1988			
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number		Ap	plied For
21		26				65-0078526			t Applicable
Suite, Apt. #, etc.		Suite, Apl. #, etc.				5. Certificate of Status Desired		\$8.75 / Fee Re	
City & State		City & State				Election Campaign Financing		\$5.00	
23		28				Trust Fund Contribution		Added t	
Zıp	Country	Ziķi	Zip Country			8. This corporation owes or has p	aid the cu	rrent year Int	angible
24	25	29	30			Personal Property Tax due June 30. Yes No			
	9. Name and Address of Curre	nt Registered Agent			Al	10. Name and Address of New R	egistered	Agent	
STAHL, JAMES F			,	31   1	Namo				
	B NORTH SWINTON AVENUE			32	Street Addre	ess (P.O. Box Number is Not Accepte	able)		
DE	LRAY BEACH FL 33444		1	33					
1									
			l 1		City		FL	_   "   '	Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the office or registered agent, or both, in the State of Llorida. Such change was authoritagent. Lam familiar with, and accept the obligations of, Section 607.0505, Florida S				by th	named corpo he corporation	oration submits this statement for the on's board of directors. I hereby acc	purpose o	of changing it pointment as	s registered registered
	or tarillar with, and accept the only	ganons of, economicon space,	TIOTICE STERLE	nos.					
SIGNATURE	Signature, typed or printed name of registered by	ont and the napple able (N	O11: Hogistered	Agent	signature require	ed when reinstating)	DATE		
12.		ID DIRECTORS	13.			ADDITIONS/CHANGES TO OFF	ICERS AN		
TITLE	SD STATES	☐ DELETE	1.1 TITL					Change	Addition
NAME	PENNEY, PHYLLIS		1.2 NAME						
STREET ADDRESS	224 GLENWOOD DRIVE		1.3 STREE						
CITY-ST-ZIP TITLE	DELRAY BEACH FL CPD	DELETE	14 CHT		ZIP			Change	Addition
NAME	PENNEY, DONALD C	<b>L3</b> ********	2 2 NAM						_
STREET ADDRESS	224 GLENWOOD DRIVE		2 3 STREET AD		ODRESS				
CITY-ST-ZIP	DELRAY BEACH FL		2 4 CITY-ST-ZIP						
TITLE		DELETE	3 1 TITL					Change	Addition
NAME			3 2 NAM	ΝE		•			
STREET ADDRESS			3.3 STR	EE1 AE	DDRESS				
CITY-ST-ZIP			3.4. CIT		ZIP				1.449
TITLE			4.1 TITU					Change	Addition
NAME			4. 2 NA			•			
STREET ADDRESS					DORESS				
CITY-ST-ZIP TITLE		DELETE	4.4 CITY - ST - ZIP DELETE 5.1 TITLE		ZIP	FIT ME 144		Change	Addition
NAME			5.2 NAI						.—
STREET ADDRESS					DDRESS .				
CITY-ST-ZIP			5.4 CIT		l l				
TITLE	-	DELETE	6.1 TITI					Change	Addition
NAME			6.2 NA	MŁ					
STREET ADDRESS			6.3 STR	EET AC	DDRESS				
CITY-ST-ZIP			6 4 CIT	Y-S1-	ZIP	Castina 110 07/2V/) Elected Statuton	I f	- 156 - 4b - 6 11 -	. i. f