FILE NOW: FILING FEE IS \$61.25 NONPROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State

AMERICADA (01.293
-------------	--------

98 NOW 10

NDED :	x1997	1998	1000	TAL .		DIVISION	OF CORPO	ORAT	TONS			20 F	ina 12	Pi	2:1.	7		
DOCU 1. Corporation	MENT on Name	# 1	125082					-				SEC	RETARY VHASSE	_OF	STATE	ı		
THE OAS:	IS OF J	ENSEN	BEACH				,						יון ליטטיייי	E, FL	ORIDA			
A CHRIS				, IN	C.													
Principal Plac	e of Business			M	failing Ad	ddress						71	ooq	02	68	923	37	·
2000 NE	Jensen	Beach	Blvá.	20	000 1	NE Jen	ısen B	Beac	h Bly	vd.		• •	ì	171:	(/35~	-010:	5 I	-002
Jensen 1	Beach, .	FL 34	1 95 7	J	ensei	n Beac	h, FL	3	34957				*	米米米市	(p1.2)	⊃ ****	KATA R	k61.25
US				Ü	S		-					e incorpor /29/19	ated or Qu	alified	J	ate of La 129/1		•
2. Principal P	Place of Busin	ess		_	. Mailing	g Address			-		4. FEI	Number -00336		_	<u> </u>		Apr	olied For
Suite, Apt.	#, etc.			26	Suite,	Apt. #, etc.										\$8.	_	Applicab
22				27							5. Cer	tificate of	Status Des	ired			e Rec	
City & Stat 23	te .	-		28	City &	State							paign Final Intribution	ncing				May Be Fees
Zip		Countr	У	281	Zip	 -	· c	Countr	ry				on has liab	ility for				
24		25		29			30				Fior	ida Statut	2S		Yes	□ No		
	9. Name	and Addre	ss of Currer	nt Regis	stered A	gent		81	1 None		10. Na	me and A	ddress of	New Re	egistered	Agent		
0	1731 -							81	1 Name		David	l Paul	. Smit	h				
	, Thomas		r.				•	82	2 Street				er is Not A		ble)			
	Land Roa		0.000					83										
Sewall	ls Poin	t, FL	34996					03	"									
								84	4 City							85	Zip C	ode
								١٠.								احدا		
11. Pursuant office or r agent. I a	to the provisi registered age im familiar wit	ons of Sect ent, or both h, and acc	tions 617.050 , in the State ept the oblig	2 and 6 of Floridations of	317.1508 da. Such f. Sectio	3, Florida St h change w in 617.0503	atutes, the ras authori I, Florida S		1	l corpor poration	ration su n's board	bmits this d of directo	statement i ors, I hereb	for the pay acce	pt the app	_ `	•	registere egistered
SIGNATURE	to the provising to the provision of the	or printed name	of registered age	nt and title	e if applicab		(NOTE: Regist	e abov ized b Statute	ve-named by the cores.		when reinst	ating)			purpose on the appointment of th	of changi pointmer	ing its	
	Signature, typed o	or printed name		nt and title	e if applicab		(NOTE Registr	e abov ized b Statute	ve-named by the cor es.		when reinst	ating)	statement (ors. I hereb		purpose on the appointment of th	of changi pointmer	ing its	
SIGNATURE	Signature, typed o	or printed name	of registered age FFICERS AN	nt and title	e if applicab	ole.	(NOTE Registr	e abovized b Statute Stered Ag	ve-named by the cor es.		when reinst	ating)			purpose on the appointment of th	of changi pointmer	ing its	3 IN 12
SIGNATURE	SIgnature, typed of SD KRTAUSO	OCH, RO	of registered age FFICERS AN BERTA	nt and title	e if applicab	ole.	[NOTE Registre 1:	e abovized b Statute stered Ag 13. 1 TITLE	ve-named by the cor es.		when reinst	ating)			purpose on the appointment of th	of changi pointmer	ing its	3 IN 12
SIGNATURE . 12. IITLE NAME	SD KRTAUSO 1162 Sf	CH, RO	of registered age FFICERS AN BERTA TOR LAI	nt and title	e if applicab	ole.	(NOTE Registrers 1:	e abovized b Statute Statute 1 TITLE 2 NAME	ve-named by the cor gent signature		when reinst	ating)			purpose on the appointment of th	of changi pointmer	ing its	3 IN 12
12. TITLE NAME STREET ADDRESS	SIgnature, typed of SD KRTAUSO 1162 SI PORT S	CH, RO	of registered age FFICERS AN BERTA TOR LAI	nt and title	e if applicab	ole.	(NOTE Registr 1: 1: 1: 1:3 1:4	e abovized b Statute stered Ag 13. 1 TITLE	ve-named by the cor es. gent signature ET ADDRESS ST-ZIP	e required	when reinst	ating)			DATE	of changi pointmer	ing its not as recovery	S IN 12
SIGNATURE 12. IITLE NAME STREET ADDRESS CITY-ST-ZIP	SD KRTAUSO 1162 Sf PORT S	CH, RO	FRICERS AN BERTA TOR LAI	nt and title D DIREC	e if applicab	DELETE	(NOTE Registration 1: 1: 1: 1: 1: 1: 1: 1: 1: 1: 1: 1: 1:	e abovized b Statute Statute 11 TITLE 2 NAME 3 STREE	ve-named by the cores. gent signature ET ADDRESS ST-ZIP	e required	ADD ADD	ating) ITIONS/CH	HANGES TO		DATE	of changi pointmen	ing its not as recovery	S IN 12
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	SD KRTAUSO 1162 SI PORT S PT SMITH,	CH, RO E PROC	of registered age FFICERS AN BERTA TOR LAM IE, FL	nt and title D DIREC	e if applicab	DELETE	(NOTE Registration 1	e aboverized bistatute stered Ag 13. 1 TITLE 2 NAME 3 STREE 4 CITY-1 1 TITLE	ve-named by the cores. gent signature ET ADDRESS ST-ZIP	e required PVI	ADD O ETH,	ating) ITIONS/CH	HANGES TO		DATE	of changi pointmen	ing its not as recovery	S IN 12
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	SD KRTAUSO 1162 SI PORT S PT SMITH, 17 ISLA	CH, RO E PROC LUC THOMA	FFICERS AN BERTA TOR LAM IE, FI, S E, JE AD	nt and title D DIREC	e if applicab	DELETE	(NOTE Registre 1: 1: 1: 1: 1: 1: 1: 1: 1: 1: 1: 1: 1:	e aboverized bistatute stered Ag 13. 1 TITLE 2 NAME 3 STREE 4 CITY-1 1 TITLE	ve-named by the cor as. gent signature ET ADDRESS ST-ZIP	PVI SMI	ADD ADD CTH,	DAVID	PAUL		DATE	of changi pointmen	ing its not as recovery	S IN 12
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS	SD KRTAUSO 1162 SI PORT S PT SMITH,	CH, RO E PROC LUC THOMA	FFICERS AN BERTA TOR LAM IE, FI, S E, JE AD	nt and title D DIREC	e if applicab	DELETE	(NOTE Registre 1: 1: 1: 1: 1: 1: 1: 1: 1: 1: 1: 1: 1:	e abovized b Statute 13. 1 TITLE 2 NAME 3 STREE 4 CITY-1 1 TITLE 2 NAME 3 STREE	ve-named by the cor es	PVI SMI	ADD ADD CTH,	DAVID	HANGES TO		DATE	of changi pointmen	TORS	IN 12 Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	SD KRTAUSO 1162 SE PORT S PT SMITH, 17 ISLU SEWALLS VPD SMITH, SMITH,	THOMA AND RO LINDA	of registered age FFICERS AN BERTA TOR LAI IE, EL, S E, JE AD T, FL	nt and title D DIREC	e if applicab	DELETE	(NOTE Registrer) 1: 1: 1: 1: 1: 1: 2: 2: 2: 2: 3:1:	e abovized b Statute 13. 1 TITLE 2 NAME 3 STREE 4 CITY-1 1 TITLE 2 NAME 3 STREE 4 CITY-1	ve-named by the cor es. gent signature et ADDRESS ST- ZIP	PVI SMI 17	ADD ADD TH, ISLA	DAVID	PAUL AD		DATE	of change of change of the cha	TORS	3 IN 12
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	SD KRTAUSO 1162 SF PORT S PT SMITH, 17 ISLA SEWALLS VPD	THOMA AND RO LINDA	of registered age FFICERS AN BERTA TOR LAI IE, EL, S E, JE AD T, FL	nt and title D DIREC	e if applicable CTORS	DELETE	(NOTE Registr 1: 1: 1: 1: 1: 1: 2: 2: 2: 2: 3:1: 3:2	e abovized b Statute Stered Ag 13. 1 TITLE 2 NAME 3 STREE 1 TITLE 2 NAME 3 STREE 4 CITY- 1 TITLE 2 NAME 2 NAME 2 NAME 2 NAME 2 NAME	ve-named by the cor es. gent signature et ADDRESS ST- ZIP	PVI SMI 17 SEV	ADD O ITH, ISLA VALLS	DAVIC	PAUL AD	O OFFIC	DATE	of change of change of the cha	TORS	IN 12 Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD KRTAUSO 1162 SE PORT S PT SMITH, 17 ISLU SEWALLS VPD SMITH, SMITH,	CH, RO CH, RO CH, RO CH, RO CH, RO CH, PROC CHOMA AND RO CHOMA LINDA AND RO AND RO	of registered age FFICERS AN BERTA TOR LAN IE, FL S E, JE AD T, FL M AD	nt and title D DIREC	e if applicable CTORS	DELETE DELETE	NOTE Registration 1	e abovized b Statute Statute 13. 1 ITILE 2 NAME 3 STREE 4 CITY- 1 ITILE 2 NAME 2 NAME 3 STREE 4 CITY- 1 TITLE 2 NAME 3 STREE 4 CITY-	ve-named by the cores. gent signature ET ADDRESS ST-ZIP ET ADDRESS -ST-ZIP	PVI SMI 17 SEV TD PON 178	ADD O ITH, ISLA VALLS VALLS VELL,	DAVIC POIN AIME	PAUL AD T', FL	ROA	DATE	D DIRECT Cha	ing its tas ri	Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE THE	SD KRTAUSO 1162 SI PORT SI PT SMITH, 17 ISLA SEWALLS VPD SMITH, 17 ISLA	CH, RO CH, RO CH, RO CH, RO CH, RO CH, PROC CHOMA AND RO CHOMA LINDA AND RO AND RO	of registered age FFICERS AN BERTA TOR LAN IE, FL S E, JE AD T, FL M AD	nt and title D DIREC	e if applicable CTORS	DELETE	(NOTE Registration 11	e above e above stered Ag 13. 1 TITLE 2 NAME 3 STREE 4 CITY- 1 TITLE 2 NAME 4 CITY- 1 TITLE 2 NAME 4 CITY- 1 TITLE 2 NAME 4 CITY- 1 TITLE 4 CITY- 1 TITLE	ve-named by the cor es. Gent signature ET ADDRESS ST- ZIP ET ADDRESS - ST- ZIP ET ADDRESS - ST- ZIP	PVI SMI 17 SEV TD PON 178	ADD O ITH, ISLA VALLS VALLS VELL,	DAVIC POIN AIME	PAUL AD T', FL	ROA	DATE	of change of change of the cha	ing its tas ri	IN 12 Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	SD KRTAUSO 1162 SI PORT SI PT SMITH, 17 ISLA SEWALLS VPD SMITH, 17 ISLA	CH, RO CH, RO CH, RO CH, RO CH, RO CH, PROC CHOMA AND RO CHOMA LINDA AND RO AND RO	of registered age FFICERS AN BERTA TOR LAN IE, FL S E, JE AD T, FL M AD	nt and title D DIREC	e if applicable CTORS	DELETE DELETE	(NOTE Registration 11	e above e above stered Ag 13. 1 TITLE 2 NAME 3 STREE 4 CITY- 1 TITLE 2 NAME	ve-named by the cores. gent signature ET ADDRESS ST-ZIP ET ADDRESS -ST-ZIP ET ADDRESS -ST-ZIP	PVI SMI 17 SEV TD PON 178	ADD O ITH, ISLA VALLS VALLS VELL,	DAVIC POIN AIME	PAUL AD T', FL	ROA	DATE	D DIRECT Cha	ing its tas ri	Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	SD KRTAUSO 1162 SI PORT SI PT SMITH, 17 ISLA SEWALLS VPD SMITH, 17 ISLA	CH, RO CH, RO CH, RO CH, RO CH, RO CH, PROC CHOMA AND RO CHOMA LINDA AND RO AND RO	of registered age FFICERS AN BERTA TOR LAN IE, FL S E, JE AD T, FL M AD	nt and title D DIREC	e if applicable CTORS	DELETE DELETE	(NOTE Registration 11	e above case as a street a statute a statute a statute a statute a street a	ve-named by the cor es. gent signature ET ADDRESS ST- ZIP ET ADDRESS - ST- ZIP ET ADDRESS - ST- ZIP	PVI SMI 17 SEV TD PON 178	ADD O ITH, ISLA VALLS VALLS VELL,	DAVIC POIN AIME	PAUL AD T', FL	ROA	DATE	D DIRECT Cha	ing its tas ri	Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CITY-ST-ZIP CITY-ST-ZIP CITY-ST-ZIP CITY-ST-ZIP	SD KRTAUSO 1162 SI PORT SI PT SMITH, 17 ISLA SEWALLS VPD SMITH, 17 ISLA	CH, RO CH, RO CH, RO CH, RO CH, RO CH, PROC CHOMA AND RO CHOMA LINDA AND RO AND RO	of registered age FFICERS AN BERTA TOR LAN IE, FL S E, JE AD T, FL M AD	nt and title D DIREC	e if applicable CTORS	DELETE DELETE DELETE	(NOTE Registration 11) 11: 12: 13: 14: 15: 14: 15: 16: 17: 17: 17: 18: 18: 18: 18: 18: 18: 18: 18: 18: 18	e above a considered Ag a cons	ve-named by the cores. gent signature ET ADDRESS -ST-ZIP	PVI SMI 17 SEV TD PON 178	ADD O ITH, ISLA VALLS VALLS VELL,	DAVIC POIN AIME	PAUL AD T', FL	ROA	DATE	D DIRECT Cha	ong its not as n	Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	SD KRTAUSO 1162 SI PORT SI PT SMITH, 17 ISLA SEWALLS VPD SMITH, 17 ISLA	CH, RO CH, RO CH, RO CH, RO CH, RO CH, PROC CHOMA AND RO CHOMA LINDA AND RO AND RO	of registered age FFICERS AN BERTA TOR LAN IE, FL S E, JE AD T, FL M AD	nt and title D DIREC	e if applicable CTORS	DELETE DELETE	(NOTE Registration 11) 11: 15: 15: 17: 17: 18: 18: 18: 18: 18: 18: 18: 18: 18: 18	e above a considered Ag a cons	ve-named by the cor es. gent signature ET ADDRESS -ST-ZIP	PVI SMI 17 SEV TD PON 178	ADD O ITH, ISLA VALLS VALLS VELL,	DAVIC POIN AIME	PAUL AD T', FL	ROA	DATE	D DIRECT Cha	ong its not as n	Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	SD KRTAUSO 1162 SI PORT SI PT SMITH, 17 ISLA SEWALLS VPD SMITH, 17 ISLA	CH, RO CH, RO CH, RO CH, RO CH, RO CH, PROC CHOMA AND RO CHOMA LINDA AND RO AND RO	of registered age FFICERS AN BERTA TOR LAN IE, FL S E, JE AD T, FL M AD	nt and title D DIREC	e if applicable CTORS	DELETE DELETE DELETE	(NOTE Registration 11) 11: 12: 13: 14: 15: 22: 23: 24: 34: 44: 45:1 52:	e above a considered Ag a cons	ve-named by the cores. gent signature ET ADDRESS -ST-ZIP	PVI SMI 17 SEV TD PON 178	ADD O ITH, ISLA VALLS VALLS VELL,	DAVIC POIN AIME	PAUL AD T', FL	ROA	DATE	D DIRECT Cha	ong its not as n	Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	SD KRTAUSO 1162 SI PORT SI PT SMITH, 17 ISLA SEWALLS VPD SMITH, 17 ISLA	CH, RO CH, RO CH, RO CH, RO CH, RO CH, PROC CHOMA AND RO CHOMA LINDA AND RO AND RO	of registered age FFICERS AN BERTA TOR LAN IE, FL S E, JE AD T, FL M AD	nt and title D DIREC	e if applicable CTORS	DELETE DELETE DELETE	(NOTE Registration 11) 11: 12: 13: 14: 15: 22: 23: 24: 34: 44: 45: 52: 53:	e above a considered Ag a cons	ve-named vy the cor es. gent signature ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP	PVI SMI 17 SEV TD PON 178	ADD O ITH, ISLA VALLS VALLS VELL,	DAVIC POIN AIME	PAUL AD T', FL	ROA	DATE	D DIRECT Cha	ong its not as n	Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD KRTAUSO 1162 SI PORT SI PT SMITH, 17 ISLA SEWALLS VPD SMITH, 17 ISLA	CH, RO CH, RO CH, RO CH, RO CH, RO CH, PROC CHOMA AND RO CHOMA LINDA AND RO AND RO	of registered age FFICERS AN BERTA TOR LAN IE, FL S E, JE AD T, FL M AD	nt and title D DIREC	e if applicab	DELETE DELETE DELETE	(NOTE Registration 11: 11: 11: 11: 11: 11: 11: 11: 11: 11	e above a considered Ag a cons	ve-narried vy the cor es. gent signature ET ADDRESS -ST-ZIP ET ADDRESS -ST-ZIP ET ADDRESS -ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP	PVI SMI 17 SEV TD PON 178	ADD O ITH, ISLA VALLS VALLS VELL,	DAVIC POIN AIME	PAUL AD T', FL	ROA	DATE	D DIRECTOR	ing its rotation in the street	Addition Addition Addition Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	SD KRTAUSO 1162 SI PORT SI PT SMITH, 17 ISLA SEWALLS VPD SMITH, 17 ISLA	CH, RO CH, RO CH, RO CH, RO CH, RO CH, PROC CHOMA AND RO CHOMA LINDA AND RO AND RO	of registered age FFICERS AN BERTA TOR LAN IE, FL S E, JE AD T, FL M AD	nt and title D DIREC	e if applicab	DELETE DELETE DELETE	(NOTE Registration 11: 11: 11: 11: 11: 11: 11: 11: 11: 11	e above a contract of the cont	vo-named yoy the cor es. Et Address ST-ZIP	PVI SMI 17 SEV TD PON 178	ADD O ITH, ISLA VALLS VALLS VELL,	DAVIC POIN AIME	PAUL AD T', FL	ROA	DATE	D DIRECT Cha	ing its rotation in the street of the street	Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	SD KRTAUSO 1162 SI PORT SI PT SMITH, 17 ISLA SEWALLS VPD SMITH, 17 ISLA	CH, RO CH, RO CH, RO CH, RO CH, RO CH, PROC CHOMA AND RO CHOMA LINDA AND RO AND RO	of registered age FFICERS AN BERTA TOR LAN IE, FL S E, JE AD T, FL M AD	nt and title D DIREC	e if applicab	DELETE DELETE DELETE	(NOTE Registration 11: 11: 11: 11: 11: 11: 11: 11: 11: 11	e above a cape a	ve-named yby the cor es. Et Address ST-ZIP	PVI SMI 17 SEV TD PON 178	ADD O ITH, ISLA VALLS VALLS VELL,	DAVIC POIN AIME	PAUL AD T', FL	ROA	DATE	D DIRECTOR	ing its rotation in the street of the street	Addition Addition Addition Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	SD KRTAUSO 1162 SI PORT SI PT SMITH, 17 ISLA SEWALLS VPD SMITH, 17 ISLA	CH, RO CH, RO CH, RO CH, RO CH, RO CH, PROC CHOMA AND RO CHOMA LINDA AND RO AND RO	of registered age FFICERS AN BERTA TOR LAN IE, FL S E, JE AD T, FL M AD	nt and title D DIREC	e if applicab	DELETE DELETE DELETE	(NOTE Registration 11: 11: 11: 11: 11: 11: 11: 11: 11: 11	e above a cape a	ve-named by the cores. Et address	PVI SMI 17 SEV TD PON 178	ADD O ITH, ISLA VALLS VALLS VELL,	DAVIC POIN AIME	PAUL AD T', FL	ROA	DATE	D DIRECTOR	ing its rotation in the street of the street	Addition Addition Addition Addition

SIGNA	ATURE:
-------	--------

DAV

DAV

DAV

DAV

DAVID PAUL SMITH

11/14/98

(561)334-9888

IN THE CIRCUIT COURT OF THE NINETEENTH JUDICIAL CIRCUIT OF FLORIDA, IN AND FOR MARTIN COUNTY.

IN RE: THE PETITION OF CASE NO. 98-453F9

Thomas E. Smith, Jr.,
Petitioner

FOR CHANGE OF NAME

FINAL JUDGMENT CHANGING NAME

THIS CAUSE having come on to be heard upon the Petition to Change the Name of Thomas Eugene Smith, These legal name to David Paul Smith (requested name) and it appearing to the Court that Petitioner is a bona fide resident of Martin County, Florida and being otherwise fully advised in the premises, it is

Copies Furnished:
Name: Thomas E. Smith, Jr.
Address: 17 151and Raad
Sewalls Point, Fl. 34996

STATE OF FLORIDA MARTIN COUNTY

THIS IS TO CERTIFY THAT THE
FOREGOING PAGES IS A TRUE
AND CORRECT COPY OF THE ORIGINAL

ES IS A TRUE
THE ORIGINAL
CLERK
ODD.C.

Page 1 of 1



November 14, 1998

Annual Reports Filings Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Dear Sirs,

Please note that Thomas E. Smith, Jr. has changed his name to David Paul Smith. We were instructed by your office that no documentation would be required.

Thank you for your assistance.

Sincerely,

Aimee Powell

The Oasis of Jensen Beach

aine Poull