

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

NONPROFIT
CORPORATION
ANNUAL REPORT
1998



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

FILED
Oct 07 1998 8:00am
Secretary of State

DOCUMENT # N96000005141 (4)

1. Corporation Name

PAUL DEVELOPMENT, INC.



Principal Place of Business

Mailing Address

2247 PALM BCH LAKES BLVD
STE 201
W PALM BCH FL 33409
US

2247 PALM BEACH LAKES BLVD
STE 201
W PALM BCH FL 33409
US

3. Date Incorporated or Qualified

10/03/1996

4. FEI Number

31-1463682

Applied For

Not Applicable

2. Principal Place of Business

21 2247 Palm Bch Lakes Blvd

2a. Mailing Address

28 Suite, Apt. #, etc.

22 225

27 Suite, Apt. #, etc.

23 City & State

W. Palm Bch, FL

28 City & State

24 Zip

33409

Country

US

29 Zip

30

Country

30

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution

☐ \$5.00 May Be Added to Fees

7. Is this nonprofit corporation a homeowners association?

☐ Yes ☒ No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.

☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

PAUL, RICHARD B
134 MARTIN CIRCLE
ROYAL PALM BCH FL 33411

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 617.0502 and 617.1508, 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 obligations of, section 617.0503, Florida Statutes.

SIGNATURE Richard B. Paul
Signature, typed or printed name of registered agent and title if applicable.

Richard B. Paul

9-10-98

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PDD ☐ DELETE
NAME PAUL, WILLIAM D
STREET ADDRESS 134 MARTIN CIRCLE
CITY-ST-ZIP ROYAL PALM BCH FL

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE VPD ☒ DELETE
NAME JONES, JAMES
STREET ADDRESS 5091 WILLOW POND ROAD W
CITY-ST-ZIP W PALM BCH FL

2.1 TITLE ☒ Change ☐ Addition
2.2 NAME Dawson, Renee
2.3 STREET ADDRESS 13899 Biscayne Blvd. Ste 201
2.4 CITY-ST-ZIP N. Miami Bch. 33181

TITLE SD ☒ DELETE
NAME PAUL, RICHARD B
STREET ADDRESS 134 MARTIN CIRCLE
CITY-ST-ZIP ROYAL PALM BCH FL

3.1 TITLE ☒ Change ☒ Addition
3.2 NAME Paul, Richard B.
3.3 STREET ADDRESS 2247 Palm Bch Lks Blvd Ste 225
3.4 CITY-ST-ZIP W. Palm Beach, FL 33409

TITLE D ☒ DELETE
NAME CRITTENDEN, CELIA T
STREET ADDRESS 134 MARTIN CIRCLE
CITY-ST-ZIP ROYAL PALM BCH FL

4.1 TITLE ☒ Change ☐ Addition
4.2 NAME Crittenden, Celia T
4.3 STREET ADDRESS 134 Martin Circle
4.4 CITY-ST-ZIP Royal Palm Bch, FL 33411

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in section 119.07(3)(f), 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Richard B. Paul Richard B. Paul

9-10-98

561-687-1234

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (5/98)