

2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 21, 2008 08:00 AM
Secretary of State

DOCUMENT # P05000005197



1. Entity Name
F.M. PROPERTIES OF THE TREASURE COAST, INC.

Principal Place of Business Mailing Address
2605 RIVERVIEW COURT 2605 RIVERVIEW COURT
VERO BEACH FL 32963 VERO BEACH FL 32963



2. Principal Place of Business - No P.O. Box # 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

1st MOORE CR2E034 (10/07)

City & State City & State 4. FEI Number **65-1244420** Applied For Not Applicable

Zip Country Zip Country 5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

COOK, DENISE S
2605 RIVERVIEW COURT
VERO BEACH FL 32963

Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Denise S. Cook* DATE 3-19-08
Signature, typed or printed name of registered agent and title, if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee Will Be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE Delete
 NAME **DVS**
 STREET ADDRESS **COOK, FRANK SR**
 CITY-ST-ZIP **2605 RIVERVIEW COURT**
VERO BEACH FL 32963

TITLE Change Addition
 NAME **U000000265552**
 STREET ADDRESS **04/07/08-80033-003 158.75**
 CITY-ST-ZIP

TITLE Delete
 NAME **DPT**
 STREET ADDRESS **COOK, DENISE S SR**
 CITY-ST-ZIP **2605 RIVERVIEW COURT**
VERO BEACH FL 32963

TITLE Change Addition
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 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
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TITLE Change Addition
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 STREET ADDRESS
 CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Denise S. Cook* DATE 3-19-08 772-581-4683
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Day/mo/yr