

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

FILED  
Feb 04 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



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

DOCUMENT # P24052 (3)

1. Corporation Name  
MEDITERRANEAN RESORTS, INC.

Principal Place of Business  
8381 OLD COURTHOUSE ROAD  
SUITE 212  
VIENNA VA 22182  
US

Mailing Address  
17757 U.S. HWY. 19 N.  
STE. 400  
CLEARWATER FL 34624  
US



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/25/1989

4. FEI Number

54-1157797

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 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

CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION FL 33324

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 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. I hereby 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 title if applicable

(NOTE: Registered Agent's signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE CD ☐ DELETE

NAME CLAVEAU, J. GEORGE  
STREET ADDRESS 8381 OLD COURTHOUSE ROAD  
CITY-ST-ZIP VIENNA VA

TITLE VD ☒ DELETE

NAME HOARTY, THOMAS M.  
STREET ADDRESS 8381 OLD COURTHOUSE ROAD  
CITY-ST-ZIP VIENNA VA

TITLE PD ☒ DELETE

NAME SOWERS, WILLIS B.  
STREET ADDRESS 17757 US HWY 19 NORTH SUITE 400  
CITY-ST-ZIP CLEARWATER FL

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PRESIDENT ☒ Change ☐ Addition

1.2 NAME  
1.3 STREET ADDRESS 8381 OLD COURTHOUSE Rd #100

1.4 CITY-ST-ZIP

2.1 TITLE VP. FINANCE ☐ Change ☒ Addition

2.2 NAME KATHLEEN CORMIER  
2.3 STREET ADDRESS 17757 US HWY 19 N., #400  
2.4 CITY-ST-ZIP CLEARWATER, FL 33764

3.1 TITLE CORP SECRETARY ☐ Change ☒ Addition

3.2 NAME MARIANNE BORDEN-MYERS  
3.3 STREET ADDRESS 17757 US HWY 19 N., #400  
3.4 CITY-ST-ZIP CLEARWATER, FL 33764

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME  
5.3 STREET ADDRESS  
5.4 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)(i), 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.

CR2E034 (10/97)