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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998

DOCUMENT # P9200008436 (7)

SILVER CLOUD CHARTERS, INC.

FILED May 13 1998 8:00am Secretary of State

Principal Place of Business Mailing Address 241 BRADLEY PLACE 241 BRADLEY PLACE PALM BEACH FL 33480 PALM BEACH FL 33480 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 12/01/1992 4. FEI Number 65-0643761 2a, Mailing Address 2. Principal Place of Business Applied For 21 505 S Flagler Dr. 505 S Flagler Dr. NOT APPLICABLE Not Applicable Suite, Apt. #, etc. Suite, Apt #, etc \$8.75 Additional 5. Certificate of Status Desired Ste. 1450 Fee Required Ste. 1450 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 West Palm Beach, FL West Palm Beach, FL Trust Fund Contribution Added to Fees 8. This corporation owes or has paid the current year Intangible 30 USA USA Yes ☐ No 25 Personal Property Tax due June 30. 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name CHAUNCEY, HARRISON K 241 BRADLEY PLACE 82 Street Address (P.O. Box Number is Not Acceptable) PALM BEACH FL 33480 83 84 City 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 chango 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 proted name of registered agent and title if applicable (NCITE Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change Addition TITLE 1.1 TITLE NAME DREYFOOS, ALEX W JR 12 NAME 505 S. FLAGLER DRIVE., STE 1450 STREET ADDRESS 1.3 STREET ADDRESS **WEST PALM BEACH FL 33401** CITY-ST-ZIP 1.4 CITY - ST - ZIP X DELETE Change Addition TITLE 2.1 TITLE DREYFOOS, CAROLYN B NAME 2.2 NAME STREET ADDRESS 505 S. FLAGLER DRIVE., STE 1450 2.3 STREET ADDRESS WEST PALM BEACH FL 33401 CITY-ST-ZIP 2. 4 CITY-ST-ZIP Change Addition DELETE TITLE 3.1 TITLE CHAUNCEY, HARRISON K JR. NAME 3.2 NAME STREET ADDRESS 241 BRADLEY PLACE 33 STREET ADDRESS PALM BEACH FL 33480 CITY-ST-ZIP 3 4. CITY - ST - ZIP DELETE TITLE 4.1 TITLE NAME 4, 2 NAME DICKRON E. MURRAY 505 S Flagler Dr., Ste. 1450 4.3 STREET ADDRESS STREET ADDRESS West Palm Beach, FL 33401 Change 4.4 CITY - ST- ZIP CITY-ST-ZIP DELETE Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADORESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE Change Addition 8.1 TITLE TIBE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY - \$1- ZIP CITY-ST-ZIP

14. Thereby 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 logal effect as if made under oath; that I am an officer or director of the corrections 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 or an attachibent with an address.

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