

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

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # **P93000004563 (1)**

1. Corporation Name

GULF ISLAND RESORT, INC.

FILED
Aug 06, 1998 08:00 AM
Secretary of State



Principal Place of Business

**6040 SEA RANCH DRIVE
HUDSON FL 33567**

Mailing Address

**6040 SEA RANCH DRIVE
HUDSON FL 33567**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/20/1993

4. FEI Number

59-3167770

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

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**ZARETSKY, LOUIS D ESQ.
555 NE 15TH STREET, SUITE 100
MIAMI FL 33132**

81

Name

82 Street Address (P.O. Box Number is Not Acceptable)

6040 Sea Ranch Drive

83

84

City

Hudson

FL

85

Zip Code

34667

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

Candy Smith
Signature, typed or printed name of registered agent and title if applicable

Office Manager
(NOTE: Registered Agent signature required when reinstating)

5-1-98
DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE
NAME **VD MARKOVITZ, EISI**
STREET ADDRESS **6040 SEA RANCH DRIVE**
CITY-ST-ZIP **HUDSON FL 33567**

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

TITLE ☐ DELETE
NAME **VD FIREWORKER, ROBERT B**
STREET ADDRESS **6040 SEA RANCH DRIVE**
CITY-ST-ZIP **HUDSON FL 33567**

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME **VD BISTRICER, ALEX**
STREET ADDRESS **6040 SEA RANCH ROAD**
CITY-ST-ZIP **HUDSON FL 34667**

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

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)(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.

SIGNATURE

G. Morham VD

1-10-98

CR2E034 (10/97)