FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

P93000018256 (6)

DOCUMENT #
1. Corporation Name OCEAN VILLAGE CLUB CONDOMINIUM BENTALS, INC.

ODEAN VILLAGE OF OCHOOMINION HERTITES INC.									
Principal Place of	Business	Mailing Address				F IBBIIDDI IIB IBIBD IIIN DONI BO	11 40 111 40 11	11 H##1 ##14# :	******* #101# #411 18
4250 HIGHWAY A1A ST. AUGUSTINE FL 32084		4250 HIGHWAY ATA St. Augustine FL :	32084						
						3. Date Incorporated or Qualified 03/10/1993	3a. Dat	te of Last R	•
. Principal Place	of Busness	2a. Mailing Address				4. FEI Number	•		Applied For
		26				59-3170655			Not Applicable
Suite, Apt. #, 6	etc	Suite, Apt. #, etc.				5. Certificate of Status Desired		*	Additional Required
City & State		City & State				6. Election Campaign Financing Trust Fund Contribution			0 May Be
Zipi	Country	Zip	Cou	ntry		8. This corporation has liability for in Florida Statutes Yes		lax under s	199.032,
	9. Name and Address of Curre	pl Pagistered Agent	30			10. Name and Address of New Ro		Agent	
	9. Name and Address of Curre	ni negistered Agent		B1	Name	10. Hame and Places of Now III	· Bioloio	- Algoin	
GEIR S	ANDRA			82		dress (P.O. Box Number is Not Acceptabl	e)		
GEIB, SANDRA 4250 A1A SOUTH				83	Sileet Adi	uress (i . c. Box Horrison is Not 7 tooptaon			
ST AUG	SUSTINE FL 32084			83					
				84	City		FI	85 Z	ip Code
S.,	nature type's or printed name of registered age OFFICERS At	ND DIRECTORS	13.	Agen	t signature requi	ired when reinstalings ADDITIONS/CHANGES TO OFF	DATE CERS AN		
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MĒ	BAILEY, ROSE MARIE		1.2 N	AME	1				
REET ACORESS	4250 A1A SOUTH, 021		1.3 \$	TREET	ADDRESS				
Y - ST - ZIP	ST. AUGUSTINE FL 3208				ST - ZIP	1775		Change	T ⊀Additii
F	V	•		ITLE		V/D □ □ □ □		☐ Change	[]. NOO:(II
VI.	TAYLOR, GERALDINE		22 N			4250 A1A SOUTH 022			
GELIADORESS	4833 AVENT DR				ADDRESS	ST. AUGUSTINE FL 3	2084		
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	FERRIER, JANE	[=Foccess	3 2 N			HOWARD, BARBARA	•		
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Mí	PINCHERA, ANN		5.2 N			IVANS, SALLY	,		
REEL ADDRESS	4250 A1A SOUTH P-26				TADDRESS	4250 A1A SOUTH D23	ነጋስርላ		
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TREET ADDRESS					T ADDRESS ST - ZIP				
1º Y - \$1 - 71P	gortify that the information supplies	d with this filing is voluntarily furn	nished and	doe	as not qualif	y for the exemption stated in Section 119	.07(3)(k), (Florida Stal	utes. I furthe

ruo mereby ceruity that the intermation supplied with this lining is voluntarity furnished and coes not quality for the exemption stated in Section 119.07(5)(8), Frontae Statutes. 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 agriress.

SIGNATURE:

904-471-3867