

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

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

FILED
Apr 14 1997 8:00am
Secretary of State

DOCUMENT # P93000018256 (6)

1. Corporation Name

OCEAN VILLAGE CLUB CONDOMINIUM RENTALS, INC.



Principal Place of Business

4250 HIGHWAY A1A
ST. AUGUSTINE FL 32084

Mailing Address

4250 HIGHWAY A1A
ST. AUGUSTINE FL 32084-7481

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

City & State

24

Zip

Country

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

City & State

29

Zip

Country

30

9. Name and Address of Current Registered Agent

GEIB, SANDRA
4250 A1A SOUTH
ST AUGUSTINE FL 32084

3. Date Incorporated or Qualified

03/10/1993

3a. Date of Last Report

02/23/1996

4. FEI Number

59-3170655

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 has liability for intangible tax under s. 199.032,
Florida Statutes

☐

Yes

☐

No

10. Name and Address of New Registered Agent

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 fee if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD
NAME BAILEY, ROSE MARIE
STREET ADDRESS 4250 A1A SOUTH, 021
CITY-ST-ZIP ST. AUGUSTINE FL
☒ DELETE

TITLE VD
NAME FERRIER, JANE
STREET ADDRESS 4250 A1A SOUTH, #022
CITY-ST-ZIP ST. AUGUSTINE FL
☐ DELETE

TITLE SD
NAME HOWARD, BARBARA
STREET ADDRESS 4250 A1A SOUTH, #B31
CITY-ST-ZIP ST. AUGUSTINE FL
☐ DELETE

TITLE TD
NAME THRAILKILL, JOHN
STREET ADDRESS 1093 A1A BEACH BLVD, #348
CITY-ST-ZIP ST. AUGUSTINE FL
☐ DELETE

TITLE D
NAME IVANS, SALLY
STREET ADDRESS 4250 A1A SOUTH, #D23
CITY-ST-ZIP ST. AUGUSTINE FL
☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY-ST-ZIP
☐ Change ☐ Addition

21 TITLE P/D
22 NAME
23 STREET ADDRESS
24 CITY-ST-ZIP
☒ Change ☐ Addition

31 TITLE
32 NAME
33 STREET ADDRESS 9 SAN LUIS LANE
34 CITY-ST-ZIP PALM COAST FL 32137
☐ Change ☐ Addition

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP
☐ Change ☐ Addition

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP
☐ Change ☐ Addition

61 TITLE D
62 NAME MARIE KIRBY
63 STREET ADDRESS 4250 A1A SOUTH, #P23
64 CITY-ST-ZIP ST. AUGUSTINE FL 32084
☐ Change ☒ Addition

14. I do 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 JOHN THRAILKILL 4/7/97 904.471.3867

CR2E034 (9/96)