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

DOCUMENT # P93000066975 (2)

TANGERINE DEVELOPMENT COMPANY

FILED Feb 19 1997 8:00am Secretary of State



Principal Place of Business Mailing Address						. 1941/201 HS 15105 HIN SOM SEM SEM SEM SING SING SING SING SING SING SEM (SS)			
201 GULF OF MEXICO DRIVE		201 GULF OF MEXICO DRIVE							
SUITE 5		SUITE 5							
LONGBOAT KEY FL 34228		LONGBOAT KEY FL 34228-4022			3. Date Incorporated or Qualified 3a. Date of Last Report 09/20/1993 03/21/1996			eport	
2. Principal P	lace of Business	2a. Mailing Address	2a. Mailing Address			4. FEI Number	1		plied For
21		26	26			65-0438513	Not Applicable		
Suite, Apt	#, etc	Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	×	\$8.75	Additional
22		27			6. Certificate of Status Desired	<u> </u>	Fee Re	quired	
City & Stat	e	City & State				Election Campaign Financing \$5.00 May Be			
23		28				Trust Fund Contribution	니	Added t	
Z _i p	Country	Zip	⊢¬ Cou	intry		8. This corporation has liability for			. 199,032,
24	9. Name and Address of Curre		30	r		Florida Statutes 10. Name and Address of New F	Yes		··
		ur veftisteren waeur		81	Name	10. Name and Address of New P	ioniero ion	Mair	· · · · · · · · · · · · · · · · · · ·
	BAUGH, JAMES E GULF OF MEXICO DR				Harrie				
			82 Street Address (P.O. Box Number is			able)			
SUITE 6				83					
LONGBOAT KEY FL 34228				~					
				84	City		FI	85 Zip (Code
44 5	10-10-007.05	00 C07 1500 Florida Cart de					Г	=	
agent. I a	registered agent, or both, in the Stati im familiar with, and accept the oblig Signature, typed or profed name of registered as					poration submits this statement for the tion's board of directors. I hereby acc ired when reinstating)	DATE.	ponunent as	registered
12.		ID DIRECTORS	13.	o Age	ni signature requi	ADDITIONS/CHANGES TO OFF		D DIRECTOR	S IN 12
TITLE	PD DELETE		1.1 71	TLE		7,55110110,0711102510-011		Change	Addition
NAME	CLABAUGH, JAMES E	<u> </u>	1.2 N						
STREET ADDRESS	201 GULF OF MEXICO DR. SI	JITE 5			ADORESS				
CITY-ST-ZIP	LONGBOAT KEY FL 34228			ity~\$1	· · · · · · · · · · · · · · · · · · ·				
TITLE	TO	DELETE	2.1 T/					Change	Addition
NAME	FULLERTON, ROBERT C		2.2 N	AME	Ì				
STREET ADDRESS	7800 BAYBERRY ROAD, SUIT	E 100	2.3 \$1	2.3 STREET ADDRESS					
CITY - ST - ZIP	JACKSONVILLE FL 32216		2.40	ITY-S	ST-ZIP		Ç S		
TITLE		DELETE	3.1 TITLE					Change	Addition
NAME	}		32 N	AME	1				
STREET ADDRESS			3.3 \$	TAEET	ADDRESS				
CITY-ST-ZIP			3.4. 0	3.4. CITY - ST - ZIP					
THILE	DELETE			4.1 TITLE				Change	Addition
NAME			4.2 N	iamé	}				
STREET ADDRESS			4.3 S	TREET	ADDRESS				
CITY-ST-ZIP		FT Nr. Far		ITY-S	T-ZIP				7 7 2200
TITLE		DELETE	5.1 Ti					Change	Addition
NAME			5.2 N						
STREET ADDRESS					ADDRESS				
CITY - \$1 - ZIP		☐ DELETE		ITY-S	T-ZIP			Change	☐ Addition
TITLE		LJ DELETE	6111		1			Ti cusude	MODITION
NAME			6.2 N						
STREET ADDRESS					ADDRESS				
CITY - ST - ZIP			6.4 C	ITY - S		die Control (10 07/070) Florido Curt			AL -

I do hereby certify that the information supplied with the 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 supplier on the sport 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 reference or tryfee appears in Block 12 or Block 13 if charged, or or part attachment with an address.

SIGNATURE:

CALLES OR DE NAME DIONINA CONTROL PRINCE THE

2/10/97 941/383-3833