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

PROFIT CORPORATION ANNUAL REPORT

1997

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Jan 23 1997 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000079393 (3)

STONECOURT DEVELOPMENTS, INC.

3. Date Incorporated or Qualified Sa. Date of Last Report Q2/15/1993 Q2/15/19	\	e of Business DUNES CIRLCE 3477	Mailing Address 1223 OCEAN DUNES CIRLCE JUPITER FL 33477-9150 US				
2. Prince of Hosines 2. Mailing Address 4. FET Number Applied for State 5. Oct. Apt. #, etc 5. Certificate of Status Desired 5. Certificate of Status Period 5. Certificate of Status Desired 5. Certificate of Status Period 5. Certificate 5. Certificate 5. Certificate 5. Certificate 5.	03		00				
Suite. Apt. #, etc. 27	2. Principal F	lace of Business	h			4. FEI Number	Applied For
City & State City & State City & State City & State City & State City & State City & State City & State City & Country Country State City & State	Suite, Apt. #, etc		Suite, Apt. #, etc.			58.75 Additional	
Zip Country Zip Country Zip Country Zip Country State of Liver Registered Agent			City & State			\$5.00 May Be	
Section Sect	<u></u>	Country		Country		8. This corporation has liability fo	r intangible tax under s. 199.032,
HEATZIG, W. GRANT 1223 OCEAN DUNES CIRCLE JUPITER FL 33477 84 City FL 85 Zip Code 11. Pursuant to the provisions of Sections 607 0502 are 607.108. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, and accept the obligations of 50505 florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, and accept the obligations of 50505 florida Statutes. The above-named corporation submits this statement for the purpose of changing its registered of the infamiliar with, and accept the obligations of 50505 florida Statutes. SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE PD	24			30			
11. Pursuant to the provisions of Sections 607 0502 are 607, 1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its 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 and accept the obligations of, Sections 607 0505. Florida Statutes SIGNATURE SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 14. OFFICERS AND DIRECTORS 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 16. PD 17. Interpolate the delay stendard accept the obligation of section and the Largh-lable (CEUE Registered Agent signature required when reinstating). 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 19.	UE		negistereo Agent	81	Name	10. Halife dita Addiess of New F	Johnson Ahaur
State Parameter Paramete				82	Street Addr	ess (P.O. Box Number is Not Accept	able)
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 agent. I am familiar with, and accept the obligations of, Section 607.0505. Florida Statutes. SIGNATURE SIGNATURE	JUF	PITER FL 33477		83			
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 agent and familiar with, and accept the obligations of, Section 607,0505. Florida Statutes. SIGNATURE Injurior paper and the provisions of Section 607,0505. Provides agent Section 607,0505.				84	City		85 Zip Code
PD	office or l agent 1 a	registered agent, or both, in the State on familiar with, and accept the obligations of the state of the stat	of Horida Such change was tions of, Section 607.0505 F	authorized by lorida Statute HF Registered Age	the corporat s.	ion's board of directors. I hereby acc	ept the appointment as registered
NAME		president and the contract of				ADDITIONS/CHANGES TO OFF	
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CHY-S1-ZIF							
NAME	\			1			
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CONTRACTOR 1 4000 OCEAN DUNES CIDOLE	NAME			3 2 NAME			
	STREET ADDRESS			3 3 STREET	ADDRESS		·
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NAME 6.2 NAME	1						
STREET ADDRESS 63 STREET ADDRESS	NAME	\		6.2 NAME	\		(

14. Too 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 office: 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 op an attachment with an address.