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

**PROFIT CORPORATION ANNUAL REPORT** 

1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

**DOCUMENT** # P93000081167 (7)

## **VILLA OF LONGBOAT CORPORATION**

Mailing Address 7800 BAYBERRY RD

## **FILED** Apr 29 1997 8:00am Secretary of State



2033 Main St. Buite 101 Sarasota fl 34237		7800 BAYBERRY RD JACKSONVILLE FL 32256-8856 US					
US					3. Date incorporated or Qualified 11/24/1993	3a. Date of La 05/01/19	
2. Principal Pla	ace of Business	2a. Mailing Address			4. FEI Number	L	Applied For
21		26			65-0459061		Not Applicable
Sulte, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired	K \$8.75 Additional Fee Required	
City & State		City & State		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees		
Zip 24	Country 25	Zip [ <b>29</b> ]	Coun	lry	<b>8.</b> This corporation has liability for intangible tax under €. 199.032, Florida Statutes ☐ Yes ☐ No		
	9. Name and Address of Curren	t Registered Agent			10. Name and Address of New Re	jistered Agent	
	BOUGH, JAMES E		8	11 Name			
201	GULF OF MEXICO DR.		Ē	2 Street A	ddress (P.O. Box Number is Not Acceptab	de)	
SUITE 6				0.100(1)	deligate (i .o. por railiso io .roc radopias		
LON	IGBOAT KEY FL 34228		Ē	3			
· .			ε	4 City	A colombia de la colo	FL 85	Zip Code
11. Pursuant t	o the provisions of Sections 607.050	2 and 607.1508. Florida Statu	ites, the abo	ve-named c	corporation submits this statement for the p	urnose of changi	na its registered
office or re	egi <mark>stered age</mark> nt, or both, in the State m familiar with, and accept the obliga	of Horida. Such change was	authorized	by the corpo	pration's board of directors. I hereby accep	ot the appointmen	it as registered
•	m ramiliar with, and accept the obliga	tions of, Section 607.0005, r	ionua Siaiu	ies.			}
SIGNATURE .	Signature, typed or printed name of registered age	of and tric d applicable INCL	If : Registrated a	Nord signature re	equired when reinstating)	DATE	
12.	OFLICERS AND		13.	190.10.9	ADDITIONS/CHANGES TO OFFIC		TORS IN 12
TITLE	D .	DELETE	1,1 101	[	DDC	<b>□x</b> Cha	nge 🔲 Addition
NAME	OLABAUGH, JAMES E		1.2 NAM	ış İ	DPS CLABAUGH, JAMES		
STREET ADDRESS	201 GULF OF MEXICO DR., S	UITE 6	1.8 STRI	ET ADORESS	201 Gulf of Mexico Dri	VA.	
CITY-ST-ZIP	LONGBOAT KEY FL 34228				Longboat Key, FL 3422		
TITLE	0	DELETÉ	2.1 7111		DVTAS	Cha	nge Addition
NAME	FULLERTON, ROBERT C		2.2 NAM		FULLERTON, ROBERT	Λ	
STREET ADDRESS	7800 BAYBERRY RD., SUITE	100	2.3 S1R	EET ADDRESS	7800 BAYBERRY ROAD		
CITY-ST-ZIP	JACKSONVILLE FL 32258		2 4 DiT	Y-ST-ZIP	JACKSONVILLE, FL 322	56	
TITLE		DELFTE	31711			☐ Cha	nge 🔲 Addition
NAME			3 2 NAN	1E			
STREET ADDRESS			3.3 STR	EET ADDRESS			
CiTY-ST-ZIP			3 <b>4</b> . CIT	Y-S1-ZIP			
TITLE		☐ DELETE	41111	F.		Cha	inge 🔲 Addition
NAME			4. 2 NA	νIE			
STREET ADDRESS			4.3 STR	EET ADDRESS			1
· CITY-ST-ZIP			4.4 CHY	1-81-ZIP			
TITLE	.*	DELETE	5.1 TITE	ŧ Ţ		☐ Cha	inge 🔲 Addition
NAME			5.2 NAN	1C			
STREET ADDRESS			5.3 STR	FET ADDRESS			
CITY-ST-ZIP		<u>.</u>	5.4 CII*	/-ST-7IP			
TITLE		☐ DELETE	6.1 TITL	ŧ T		☐ Cha	inge 🔲 Addition
NAME			6.2 NAN	A.E.			
STREET ADDRESS			6.3 STR	RET ADDRESS			
CITY-ST-ZIP			6.4 CIT	r - S1 - Z(P			

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