SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. IMOUNT DUE 07 08 BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

CORPORATION **ANNUAL REPORT**

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9400008980 (2)

ISLAND PLAZA PARTNERS CORPORATION

Principal Place		· ·	Mailing Address				
2655 N OCEA SUITE 500	IN DR	2655 N OCEA SUITE 500	2655 N OCEAN DR				
SINGER ISLAI	ND FL 33404		SINGER ISLAND FL 33404			DO NOT WRITE IN THIS SPACE	
						3. Date Incorporated or Qualified	3a. Date of Last Report
						02/03/1994	07/11/1996
2. Principal Pi	lace of Business	2a. Mailing Ad	dress			4. FEI Number	Applied For
21		26				65-0046446	Not Applicable
Sulte, Apt.	#, etc.	Suite, Apt.	Suite, Apt. #, etc.			5. Certificate of Status Desired	□ \$8.75 Additional
22		27				Certificate of Status Desired	Fee Required
City & State	9		City & State			6. Election Campaign Financing	\$5.00 Мау Ве
23		28				Trust Fund Contribution	Added to Fees
Zip	Country	Zip		ุ Country า		8. This corporation owes or has pa	
24	9. Name and Address of Curre	nt Pegistered Agent	30	J		Personal Property Tax due June 10. Name and Address of New Re	
EN	GEL, LINDA K	it negistered Agent	·	81	Name	IV. Name and Address of New Ac	Bistelen våetir
2655 N OCEAN DR				82	Street Ac	dress (P.O. Box Number is Not Acceptat	ole)
SUITE 500 SINGER ISLAND FL 33404				83			——————————————————————————————————————
)	IGEN ISLAND FE 33404						
				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 displacions of Section 607.0505, Florida Statutes. SIGNATURE Signature type of printed range of registered agent and bits if applicable. (NOIT this statement for the purpose of changing its registered of directors. I hereby accept the appointment as registered agent. I am familiar with a statement for the purpose of changing its registered of the province of the prov							
12.		DIRECTORS		13.		ADDITIONS/CHANGES TO OFFIC	CERS AND DIRECTORS IN 12
TITLE	DP		DELETE	1.1 TITLE			☐ Change ☐ Addition
NAME	WIITA, B. BRIAN	•••		1.2 NAME	-		}
STREET ADDRESS	2655 N OCEAN DR., SUTE S	500		1.3 STREET	ADDRESS		
CITY-ST-ZIP	SINGER ISLAND FL 33404			14 C(TY-S)	r-ZIP		
TITLE		Ļ	DELETÉ	21 TITLE			☐ Change ☐ Addition
NAME				22 NAME			
STREET ADDRESS				2.3 STREET	ADDRESS		
CITY-ST-ZIP			OC LETT	2.4 CITY-5	37 - ZIP		
TITLE			DELETE	3.1 TITLE	Į		Change Addition
NAME				3.2 NAME			
STREET ADDRESS				3.3 STREET			
CITY-\$1-ZIP			DELETE	3.4. CITY - S	11 - ZIP		Change Addition
NAME		رے	OLLETE	4.1 TITLE			C Change C Addition
{ [4. 2 NAME	1DDDros		i
STREET ADDRESS				4.3 STREET			
CITY-ST-ZIP			DELETE	4.4 CHTY-S	1 - Lit		☐ Change ☐ Addition
NAME		J		5.2 NAME			
STREET ADDRESS				5.3 STREET	Aringree		
CITY-\$T-ZIP				5.4 CiTY-S	1		
TITLE		П	DELETE	6.1 TITLE	1 - 411		Change Addition
NAME		J		6.2 NAME			
STREET ADDRESS				6.3 STREET	ADDRESS		İ
DITU 67 7/0				D.O DIRECT	. 515		

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 or an attachment with an address.

FILED

Aug 18 1997 8:00am

Secretary of State