

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

FILED
May 19 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P94000031291 (5)

1. Corporation Name

OAK HARBOR VILLAS COMMUNITY, INC.

Principal Place of Business

2121 GRAND HARBOR BLVD.
VERO BEACH FL 32967

Mailing Address

2121 GRAND HARBOR BLVD.
VERO BEACH FL 32967



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 04/25/1994	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 65-0501793	Applied For Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24	Country	29	Country	8. This corporation owes or has paid the current year's Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent	
HENN, PETER J 2121 GRAND HARBOR BLVD. VERO BEACH FL 32967				81	Name
				82	Street Address (P.O. Box Number is Not Acceptable)
				83	
				84	City
				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 title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN #2	
TITLE	D PROCTOR, DONALD O. <input checked="" type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	2121 GRAND HARBOR BLVD.	1.2 NAME	BYRNE, SUE C.
STREET ADDRESS	VERO BCH FL	1.3 STREET ADDRESS	2121 GRAND HARBOR BLVD
CITY-ST-ZIP		1.4 CITY-ST-ZIP	VERO BEACH, FL 32967
TITLE	S <input type="checkbox"/> DELETE	2.1 TITLE	VP/IS
NAME	HENN, PETER J.	2.2 NAME	
STREET ADDRESS	2121 GRAND HARBOR BLVD.	2.3 STREET ADDRESS	
CITY-ST-ZIP	VERO BCH FL	2.4 CITY-ST-ZIP	
TITLE	D UPTAIN, KENNETH L. <input checked="" type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	2121 GRAND HARBOR BLVD.	3.2 NAME	STORETVEDT, JAN PETTER
STREET ADDRESS	VERO BCH FL	3.3 STREET ADDRESS	2121 GRAND HARBOR BLVD
CITY-ST-ZIP		3.4 CITY-ST-ZIP	VERO BEACH, FL 32967
TITLE	P <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WIDELL, DOUG	4.2 NAME	
STREET ADDRESS	2121 GRAND HARBOR BLVD.	4.3 STREET ADDRESS	
CITY-ST-ZIP	VERO BCH FL	4.4 CITY-ST-ZIP	
TITLE	VPT <input type="checkbox"/> DELETE	5.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	D'HAESELEER RONALD V.	5.2 NAME	VP
STREET ADDRESS	2121 GRAND HARBOR BLVD.	5.3 STREET ADDRESS	
CITY-ST-ZIP	VERO BCH FL	5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		6.2 NAME	PODBOY, EDWARD F.
STREET ADDRESS		6.3 STREET ADDRESS	2121 GRAND HARBOR
CITY-ST-ZIP		6.4 CITY-ST-ZIP	VERO BEACH, FL 32967

14. I 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

4/23/98 561-562-9000

CR2E034 (10/97)