**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P94000038802

ENCORE DEVELOPMENT, INC.

| Principal Place of Business                             |  |
|---|--|
| 4190 BELFORT ROAD<br>SUITE 340<br>JACKSONVILLE FL 32216 |  |
|   |  |

## FILED May 01, 1999 8:00 am Secretary of State

05-01-1999 90100 039 \*\*\*150.00



| ·   |  |                                |  |  |  |  |  |                              |
|---|--|--------------------------------|--|--|--|--|--|------------------------------|
| Principal Place   | e of Business  | Mailing Address                |  |  |  | - I AMAREMA (IN IBIL) NIBIN NBILL NDIA NDIA  | #4100 11105 10101 10111                | ABITA TIEL TAN               |
| 4190 BELFORT  |  | 4190 BELFORT ROAD              |  |  |  |  |  |                              |
| SUITE 340   |  | SUITE 340                      |  |  |  | DO MOT WRITE IN  | THE SPACE                              |                              |
| JACKSONVILLE FL 32216 JACKSONVILLE FL 32216   |  |                                |  |  |  | DO NOT WRITE IN  3. Date Incorporated or Qualifed  | THIS SPACE                             |                              |
|   |  |                                |  |  |  | \  |  | -                            |
| 6 Direi-10  | N- of Decision   | a- Mailing Address             | _  |  |  | 05/19/1994<br>4. FEI Number  | ΙΔ                                     | pplied For                   |
| _   | Place of Business  2  Belfort Rd  2a  Mailing Address  26  SZ10 Belfort  |                                |  | DN   |  | 59-3248226   |  | ot Applicable                |
| 21 5210<br>Suite, Apt.  |  | Suite, Apt. #, etc.            | 1011   | ~~   |  |  |  | Additional                   |
| 300   | <b>#</b> , 610.  | 27 300                         |  |  |  | 5. Certifcate of Status Desired  |  | equired                      |
| City & State  | <u> </u>   | City & State                   |  |  |  | 6. Election Campaign Financing   | \$5.00                                 | May Be                       |
|   | sonville fl  | 28 Jacksonvil                  | le   | FI   |  | Trust Fund Contribution  | •                                      | to Fees                      |
| Zip   | Country  | Zip                            | Cou  |  |  | 8. This corporation owes the current ye  | ear Intangible                         |                              |
| 24 3225   | 56 25 USA  | 29 32256                       | 30   | USA  |  | Personal Property Tax.   | Yes                                    | □No                          |
| , -   | 9. Name and Address of Current   | Registered Agent               |  |  |  | 10. Name and Address of New Regist   | ered Agent                             |                              |
|   |  |                                |  | 81 Na  | ıme  |  |  | }                            |
|   | NARD, TOM  |                                |  | 82 St  | reet Addr  | ress (P.O. Box Number is Not Acceptable)   |  |                              |
|   | 5 BAY PLANTATION DRIVE   |                                |  |  |  |  |  |                              |
| JACI  | KSONVILLE FL 32223   |                                |  | 83   |  |  |  | İ                            |
|   |  |                                |  | 84 Cit   |  |  | 85 Zip                                 | Code                         |
|   |  |                                | _  |  | •  |  | FL "                                   |                              |
| 11. Pursuant  | to the provisions of Sections 607.0502                                   | end 607.1508, Florida Statut   | es, the al   | bove-nar   | med corp   | poration submits this statement for the purpo<br>on's board of directors. I hereby accept the                    | ise of changing it<br>appointment as r | s registered<br>egistered    |
| agent. I a  | m familiar with, and accept the obligati                                 | ions of, Section 607.0505, Flo | rida Statı   | ites.  | oo por a a   | 51.5 550. u 5. 01.50. e 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.   |  |                              |
| SIGNATURE   |  |                                |  |  |  | ad when reinstating) DA  |  |                              |
|   | Signature, typed or printed name of registered agent                     | CANAL Wandleship CHOTT         |  |  |  |  |  |                              |
|   |  | (                              |  | Agent sign:  | ature require  |  |  | ORS IN 12                    |
| 12.   | OFFICERS AND   | D DIRECTORS                    | 13.  |  | ature require  | ADDITIONS/CHANGES TO OFFICER   |  | ORS IN 12                    |
| TITLE   | OFFICERS AND   | (                              | 13.  | T.E  | ature require  |  | RS AND DIRECT                          |                              |
| TITLE<br>NAME   | OFFICERS AND P LEONARD, TOM  | D DIRECTORS  DELETE            | 13.<br>1.1 TII<br>1.2 NA   | TLE<br>IME   |  |  | RS AND DIRECT                          |                              |
| TITLE  NAME  STREET ADDRESS   | OFFICERS AND P LEONARD, TOM 12905 BAY PLANTATION DRIVE                   | D DIRECTORS  DELETE            | 13.<br>1.1 TII<br>1.2 NA<br>1.3 ST   | TLE<br>IME<br>REET ADD   |  |  | RS AND DIRECT                          |                              |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP   | OFFICERS AND P LEONARD, TOM  | O DIRECTORS                    | 13.<br>1.1 TR<br>1.2 NA<br>1.3 ST<br>1.4 CF  | TLE<br>IME<br>REET ADDA  | RESS   | ADDITIONS/CHANGES TO OFFICER   | RS AND DIRECT                          |                              |
| TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE   | OFFICERS AND P LEONARD, TOM 12905 BAY PLANTATION DRIVE                   | D DIRECTORS  DELETE            | 13.<br>1.1 TII<br>1.2 NA<br>1.3 ST<br>1.4 CF<br>2.1 TII  | TLE  ME  REET ADDF  TY-ST-ZIP  TLE   | RESS   | ADDITIONS/CHANGES TO OFFICER   | RS AND DIRECT                          | Addition                     |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME  | OFFICERS AND P LEONARD, TOM 12905 BAY PLANTATION DRIVE                   | O DIRECTORS                    | 13.<br>1.1 TII<br>1.2 NA<br>1.3 ST<br>1.4 CI<br>2.1 TII<br>2.2 NA  | TLE ME REET ADDE TY-ST-ZIP TLE ME  | RESS V f   | ADDITIONS/CHANGES TO OFFICER   | RS AND DIRECT                          | Addition                     |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS   | OFFICERS AND P LEONARD, TOM 12905 BAY PLANTATION DRIVE                   | O DIRECTORS                    | 13.<br>1.1 TII<br>1.2 NA<br>1.3 ST<br>1.4 CF<br>2.1 TII<br>2.2 NA<br>2.3 ST  | TLE  ME  REET ADDR  TY-ST-ZIP  TLE  ME  REET ADDR  | RESS VF  | additions/changes to officer  benard, Bob  37 Hawkcrest Drive  | RS AND DIRECT                          | Addition                     |
| TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  | OFFICERS AND P LEONARD, TOM 12905 BAY PLANTATION DRIVE                   | O DIRECTORS                    | 13.<br>1.1 TII<br>1.2 NA<br>1.3 ST<br>1.4 CI<br>2.1 TII<br>2.2 NA<br>2.3 ST<br>2.4 CI  | TLE  ME  REET ADDA  IY-ST-ZIP  ILE  ME  REET ADDI  ITY-ST-ZIP  | RESS VF  | additions/changes to officer<br>benard, Bob<br>37 Hawkcrest Drive  | RS AND DIRECT                          | ☐ Addition                   |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE   | P<br>LEONARD, TOM<br>12905 BAY PLANTATION DRIVE<br>JACKSONVILLE FL 32223 | D DIRECTORS  DELETE            | 13.<br>1.1 TII<br>1.2 NA<br>1.3 ST<br>1.4 CF<br>2.1 TII<br>2.2 NA<br>2.3 ST  | LE  ME  REET ADDA  IY-ST-ZIP  ILE  ME  REET ADDI  ITY-ST-ZIP  ILE  | RESS VF  | additions/changes to officer  benard, Bob  37 Hawkcrest Drive  19cksonville, Fl. 32259                           | RS AND DIRECT Change                   | ☐ Addition                   |
| TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME   | P LEONARD, TOM 12905 BAY PLANTATION DRIVE JACKSONVILLE FL 32223          | D DIRECTORS  DELETE            | 13. 1.1 TII 1.2 NA 1.3 ST 1.4 CT 2.1 TII 2.2 NA 2.3 ST 2.4 CT 3.1 TII 3.2 NA   | LE  REET ADDR  TY-ST-ZIP  TLE  WEET ADDR  TY-ST-ZIP  TLE  TY-ST-ZIP  | RESS VI LE             | additions/changes to officer  benard, Bob  137 Hawkcrest Drive  13cksonville, Fl. 32259                          | RS AND DIRECT Change                   | ☐ Addition                   |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS   | P LEONARD, TOM 12905 BAY PLANTATION DRIVE JACKSONVILLE FL 32223          | D DIRECTORS  DELETE            | 13. 1.1 TII 1.2 NA 1.3 ST 1.4 CI 2.1 TII 2.2 NA 2.3 ST 2.4 CI 3.1 TII 3.2 NA 3.3 ST  | LE REET ADDA IY-ST-ZIP ILE WAE REET ADDI ITY-ST-ZIP ILE ITY-ST-ZIP ILE IME   | RESS VF Le 16 J VF Por | additions/changes to officer  benard, Bob  137 Hawkcrest Drive  14cksonville, Fl. 32259  18184. Sean  180x 51232 | RS AND DIRECT Change                   | ☐ Addition                   |
| TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  CITY-ST-ZIP  STREET ADDRESS  CITY-ST-ZIP  | P LEONARD, TOM 12905 BAY PLANTATION DRIVE JACKSONVILLE FL 32223          | D DIRECTORS  DELETE            | 13. 1.1 TII 1.2 NA 1.3 ST 1.4 CI 2.1 TII 2.2 NA 2.3 ST 2.4 CI 3.1 TII 3.2 NA 3.3 ST  | LE ME REET ADDA IY-ST-ZIP ILE ME REET ADDI ITY-ST-ZIP ILE ME REET ADDI ITY-ST-ZIP ILE ME   | RESS VF Le 16 J VF Por | additions/changes to officer  benard, Bob  137 Hawkcrest Drive  13cksonville, Fl. 32259                          | RS AND DIRECT Change                   | ☐ Addition                   |
| TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  TITLE  TITLE  TITLE  TITLE  TITLE  | P LEONARD, TOM 12905 BAY PLANTATION DRIVE JACKSONVILLE FL 32223          | D DIRECTORS  DELETE  DELETE    | 13. 1.1 TIT 1.2 NA 1.3 ST 1.4 CI 2.1 TIT 2.2 NA 2.3 ST 2.4 CI 3.1 TIT 3.2 NA 3.3 ST 3.4 CI   | LE ME REET ADDA IY-ST-ZIP ILE ME REET ADDI ITY-ST-ZIP ILE ME REET ADDI ITY-ST-ZIP ILE ITY-ST-ZIP ILE   | RESS VF Le 16 J VF Por | additions/changes to officer  benard, Bob  137 Hawkcrest Drive  14cksonville, Fl. 32259  18184. Sean  180x 51232 | RS AND DIRECT Change                   | ☐ Addition                   |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME TITLE NAME NAME  | P LEONARD, TOM 12905 BAY PLANTATION DRIVE JACKSONVILLE FL 32223          | D DIRECTORS  DELETE  DELETE    | 13. 1.1 TII 1.2 NA 1.3 ST 1.4 CC 2.1 TII 2.2 NA 2.3 ST 2.4 CC 3.1 TII 3.2 NA 3.3 ST 3.4 CC 4.1 TII 4.2 NA  | LE ME REET ADDR ITY-ST-ZIP LE ME REET ADDR ITY-ST-ZIP LE ME REET ADDR ITY-ST-ZIP LE AME AME  | RESS VI Le 16 J VI Por Por Por J G                         | additions/changes to officer  benard, Bob  137 Hawkcrest Drive  14cksonville, Fl. 32259  18184. Sean  180x 51232 | RS AND DIRECT Change                   | ☐ Addition                   |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS  | P LEONARD, TOM 12905 BAY PLANTATION DRIVE JACKSONVILLE FL 32223          | D DIRECTORS  DELETE  DELETE    | 13. 1.1 TII 1.2 NA 1.3 ST 1.4 CC 2.1 TII 2.2 NA 2.3 ST 2.4 CC 3.1 TII 3.2 NA 3.3 ST 3.4 CC 4.1 TII 4.2 NA 4.3 ST   | ILE ME REET ADDA IY-ST-ZIP ILE ME REET ADDA ITY-ST-ZIP ILE REET ADDI ITY-ST-ZIP ILE REET ADDI ITY-ST-ZIP ILE AME REET ADDI   | RESS VI Le 16 J VI Por Por Por J G                         | additions/changes to officer  benard, Bob  137 Hawkcrest Drive  14cksonville, Fl. 32259  18184. Sean  180x 51232 | RS AND DIRECT Change                   | ☐ Addition                   |
| TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  | P LEONARD, TOM 12905 BAY PLANTATION DRIVE JACKSONVILLE FL 32223          | D DIRECTORS  DELETE  DELETE    | 13. 1.1 TII 1.2 NA 1.3 ST 1.4 CC 2.1 TII 2.2 NA 2.3 ST 2.4 CC 3.1 TII 3.2 NA 3.3 ST 3.4 CC 4.1 TII 4.2 NA 4.3 ST   | LE ME REET ADDA IY-ST-ZIP ILE ME REET ADDI ITY-ST-ZIP ILE  | RESS VI Le 16 J VI Por Por Por J G                         | additions/changes to officer  benard, Bob  137 Hawkcrest Drive  14cksonville, Fl. 32259  18184. Sean  180x 51232 | RS AND DIRECT Change                   | ☐ Addition                   |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE   | P LEONARD, TOM 12905 BAY PLANTATION DRIVE JACKSONVILLE FL 32223          | D DELETE  DELETE               | 13. 1.1 TII 1.2 NA 1.3 ST 1.4 CC 2.1 TIT 2.2 NA 2.3 ST 2.4 CC 3.1 TIT 3.2 NA 3.3 ST 3.4 CC 4.1 TIT 4.2 NA 4.3 ST 4.4 CC  | TLE  ME  REET ADDA  TLE  ME  REET ADDI  TY-ST-ZIP  TLE  ME  REET ADDI  TY-ST-ZIP  TLE  AME  REET ADDI  TY-ST-ZIP  TLE  AME  REET ADDI  TY-ST-ZIP  TLE  | RESS VI Le 16 J VI Por Por Por J G                         | additions/changes to officer  benard, Bob  137 Hawkcrest Drive  14cksonville, Fl. 32259  18184. Sean  180x 51232 | RS AND DIRECT Change                   | ☐ Addition                   |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME  | P LEONARD, TOM 12905 BAY PLANTATION DRIVE JACKSONVILLE FL 32223          | D DELETE  DELETE               | 13. 1.1 TII 1.2 NA 1.3 ST 1.4 CC 2.1 TII 2.2 NA 2.3 ST 2.4 CC 3.1 TII 3.2 NA 3.3 ST 3.4. CC 4.1 TII 4.2 N. 4.3 ST 4.4 CC 5.1 TI 5.2 NA   | TLE  ME  REET ADDA  TLE  ME  REET ADDI  TY-ST-ZIP  TLE  ME  REET ADDI  TY-ST-ZIP  TLE  AME  REET ADDI  TY-ST-ZIP  TLE  AME  REET ADDI  TY-ST-ZIP  TLE  | RESS VI LE             | additions/changes to officer  benard, Bob  137 Hawkcrest Drive  14cksonville, Fl. 32259  18184. Sean  180x 51232 | RS AND DIRECT Change                   | ☐ Addition                   |
| TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS | P LEONARD, TOM 12905 BAY PLANTATION DRIVE JACKSONVILLE FL 32223          | D DELETE  DELETE               | 13. 1.1 TIT 1.2 NA 1.3 ST 1.4 CT 2.1 TIT 2.2 NA 2.3 ST 2.4 CT 3.1 TIT 3.2 NA 3.3 ST 3.4 CT 4.1 TIT 4.2 NA 4.3 ST 4.4 CT 5.1 TT 5.2 NA 5.3 ST 5.4 ST 5.4 ST 5.5 ST 5.5 ST   | ILE  ME  REET ADDA  IY-ST-ZIP  ILE  ME  REET ADDA  ITY-ST-ZIP  ILE  ME  REET ADDA  ITY-ST-ZIP  ILE  AME  REET ADDA  ITY-ST-ZIP  ILE  AME  REET ADDA  IY-ST-ZIP  ILE  IY-ST-ZIP  ILE  | RESS VI LE             | additions/changes to officer  benard, Bob  137 Hawkcrest Drive  14cksonville, Fl. 32259  18184. Sean  180x 51232 | RS AND DIRECT Change                   | ☐ Addition                   |
| TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME   | P LEONARD, TOM 12905 BAY PLANTATION DRIVE JACKSONVILLE FL 32223          | D DELETE  DELETE               | 13. 1.1 TIT 1.2 NA 1.3 ST 1.4 CT 2.1 TIT 2.2 NA 2.3 ST 2.4 CT 3.1 TIT 3.2 NA 3.3 ST 3.4 CT 4.1 TIT 4.2 NA 4.3 ST 4.4 CT 5.1 TT 5.2 NA 5.3 ST 5.4 ST 5.4 ST 5.5 ST 5.5 ST   | TLE  ME  REET ADDA  TLE  ME  REET ADDA  TLE  ME  REET ADDA  TY- ST- ZIP  TLE  AME  REET ADDA  TY- ST- ZIP  TLE  ME  REET ADDA  TY- ST- ZIP  TLE  ME  REET ADDA  TY- ST- ZIP  TLE  TLE  TLE  TLE  TLE  TLE  TLE  TL   | RESS VI LE             | additions/changes to officer  benard, Bob  137 Hawkcrest Drive  14cksonville, Fl. 32259  18184. Sean  180x 51232 | RS AND DIRECT Change                   | Addition  Addition  Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP               | P LEONARD, TOM 12905 BAY PLANTATION DRIVE JACKSONVILLE FL 32223          | D DELETE  DELETE  DELETE       | 13. 1.1 TIT 1.2 NA 1.3 ST 1.4 CT 2.1 TIT 2.2 NA 2.3 ST 2.4 CI 3.1 TIT 3.2 NA 3.3 ST 3.4 CI 4.1 TIT 4.2 N 4.3 ST 4.4 CT 5.1 TT 5.2 NA 5.3 ST 5.4 CI 5. CI 5 | TLE  ME  REET ADDA  IY-ST-ZIP  TLE  ME  REET ADDA  ITY-ST-ZIP  TLE  ME  REET ADDA  ITY-ST-ZIP  TLE  AME  REET ADDA  IY-ST-ZIP  TLE  ME  REET ADDA  IY-ST-ZIP  TLE  ME  REET ADDA  IY-ST-ZIP  TLE  ME  REET ADDA  IY-ST-ZIP  TLE  ITY-ST-ZIP  TLE  ITY-ST-ZIP  TLE  ITY-ST-ZIP  TLE | RESS VI LE             | additions/changes to officer  benard, Bob  137 Hawkcrest Drive  14cksonville, Fl. 32259  18184. Sean  180x 51232 | RS AND DIRECT Change Change            | Addition  Addition  Addition |

6.4 CITY-ST-ZIP 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 of the receiver of 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, with all other like empowered.

**SIGNATURE:** 

84-596-870