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

**PROFIT** CORPORATION **ANNUAL REPORT** 

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Morthami Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000050735 (7)

APPROVED AND FILED

1997 OCT -6 PM 2: 12

SECRETARY OF STATE TALLAHASSEE, FLORIDA

INE HA	AHBOHAGE AT SEMINOLE	COVE, INC.				
Principal Plac	ce of Business	Mailing Address				
·		•				
1670 S.W. 35TH CIRCLE PO BOX 1308 OKEECHOBEE FL 34974 OKEECHOBEE FL 3497						
US US			040.0		DO NOT WRITE IN THIS SPACE	
					3. Date Incorporated or Qualified 3a. Date of Last Report	
		* y			07/08/1994 04/10/1996	
· ·	Place of Business	2a. Mailing Address			4. FEI Number Applied For	
21	· · · · · · · · · · · · · · · · · · ·	26			65-0503519 Not Applical	ole
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired \$8.75 Additional	
City & Sta	lo.	City & State		<del></del>	Fee Required	
23		} <del></del>			6. Election Campaign Financing \$5.00 May Be	
Zip	Country	Zip	Countr		Trust Fund Contribution Added to Fees	
24	25	29	30	у	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes X No	
	9. Name and Address of Curre		1301		Personal Property Tax due June 30. Yes No  10. Name and Address of New Registered Agent	
\CEA	NELLY, ANDREW L.		8.	Name		
	1 N FLAGLER DR		ļ		NORMAN L. BAUM	
	ST PALM BEACH FL 33407		82	1 30000	(Address (P.O. Box Number is Not Acceptable)	
116	OT PALMI DEAON PE 33407		83		23276 COSTA DEL SOL BLUE	<u></u>
			84	City	OCA PATON FL 85 Zip Codo 33 43 3	
11. Pursuant	to the provisions of Sections 607 056	02 and 607 1508 Florida Statu	tos the abov	/o-named	Corporation submits this statement for the purpose of changing its	
office or i	registered agent ecbolin in the State	of Florida Such change was	authorized t	y the corp	d corporation submits this statement for the purpose of changing its registered reporation's board of directors. I hereby accept the appointment as registered	ia
	an tansilal with and accept the orthig	30, Section 607,0505, F	iorida Statute	ıs.		İ
SIGNATURE	Signature, typod or printed name of registered ag	ent and title it applicable (NC)	TE Boostored Ar	nol signature	e required when reinstating) DATE.	_
12.		D DIRECTORS .	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	DELETE	1.1 TITLE	·····]	Change Additi	an
NAME	Fennelly, andrew L.		1.2 NAME		NORMAN LIBAUM	
STREET ADDRESS	3701 N FLAGLER DR		1.3 STREE	T ADDRESS	23276 Costa DEL SOL BLUD	
CITY-ST-ZIP	WEST PALM BEACH FL		1.4 CITY-	ST-7/P	BOCARATON RL 33433	
TITLE	VPTD	☐ DELETE	2.1 TITLE		VPD M Change Additi	on
NAME	BAUM, NORMAN L.		2.2 NAME	ļ	LAUNGWEE BAUM	
STREET ADDRESS	23276 COSTA DEL SOL		2.3 STREE	T ADDRESS	1670 S.W. 35 CIRCLE	ļ
CITY-ST-ZIP	BOCA RATON FL		2 4 CHY-	ST-ZIP	OILEGCHOBGE FL 34974	1
TITLE		DELETE	3 1 TITLE		☐ Change ☐ Add/ti	on
NAME			3.2 NAME			
STREET ADDRESS			3 3 STREE	T ADDRESS	1000023180119	
CITY-ST-ZIP			3.4. CITY-	S1 - ZIP		ľ
TITLE		☐ DELFTE	4.1 TITLE		****550.00 *****550.00	on .
NAME			4. 2 NAME	- 1		
STREET ADDRESS			4.3 STREE	ADDRESS		
CITY-ST-ZIP			4.4 City-	ST - 71P		
TITLE		DELETE	5.1 TITLE		☐ Change ☐ Addition	'n
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET	ADDRESS		
CITY-ST-ZIP			5.4 CITY - 9	51-2(P		
TITLE	V	DELETE	6.1 TITLE		Charles Line	n
NAME			6.2 NAME	ļ	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	
STREET ADDRESS			6.3 STREET	ADDRESS	1.0)m	
CITY-ST-ZIP			64 CHY-5	31 - 71P		- 1

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 directly 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.