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

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

appears in Block 12 or Block

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

**FILED** 

May 19 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # **P95000062332 (8)**1. Corporation Name

## DOMINION DEVELOPMENT CORPORATION

2201 SAWGRASS VILLAGE DRIVE PONTE VEDRA BEACH FL 32082		P O BXO 2105 PONTE VEDRA BEACH FL 32004-2105 US				Date Incorporated or Qualified     08/11/1995	3a. Date of Last Report 07/23/1996			
• Drive keel	Place of Business	2a, Mailing Address				4. FEI Number	VIJE	0/ 18		- Carl Car
	Mace o business	<u>-</u>				59-3331313		}	<b>→</b> ∸	plied For t Applicable
21 Suite, Apt	# etc	Suite, Apt. #, etc.			<del></del>	08 000 10 10		60		dditional
22		27				5. Certificate of Status Desired	Fee Required			
City & Sta 23		City & State				Election Campaign Financing     Trust Fund Contribution				May Be o Fees
Zip <b>24</b>	Country 25	Zip Country <b>30</b>				8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes				
	g. Name and Address of Current					10. Name and Address of New Re	gistered A	gent		
BRA	ant, moore sapp, macdonald	& WELLS, P.A.	81	] 1	Name					
	NORTH LAURA STREET		82		Street Addre	ss (P.O. Box Number is Not Acceptab	le)			
	TE 3100 :KSONVILLE FL 32202		63	╁			· · · · · · · · · · · · · · · · · · ·			
UNIO	ACOUNTED TO OPPOR		84	١.,	City			85	Zip (	`ada
			64	Ϊ,	City		FL	65	zip (	20G0
SIGNATURE  12.  14.	Signature, typied or pilited name of registered ager OFFICERS AND		13.	ent i	signature required	d when reinslating) ADDITIONS/CHANGES TO OFFIC	DATE SERS AND	DIRE		S IN 12
NAME	KASHOU. JOHN	Detere	12 NAME		ĺ				a. go	
STREET ADDRESS	ANAL DAMORADO MILLADE DO	Æ	13 STREET		ODRESS					
CHY+\$1-769	PONTE VEDRA BEACH FL 3208		1.4 CHY-S		ì					
TILE	V	☐ DELETE	2.1 TITLE				<del></del>	☐ Ch	ange	Addition
N/ME	GALASKI, EDWIN		2.2 NAME		}					
STREET ADDRESS			2.3 STREET	T AD	)DRESS					
C-17 - 5" - 71P	PONTE VEDRA BEACH FL		2.4 CITY-	ST-	ZIP					
THE	VICE PRESIDENT	☐ DELETE	3.1 TITLE		1			☐ Ch	ange	Addition
NAME State of the section	JAMES KASHOU	11 - 75 '	3.2 NAME	<b>.</b>	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
STREET ADORESS			3.3 STREET		}					
CON SI-78 TRUE	Ponte Vedra Bch.		3.4, CITY-1 4.1 TITLE	51-	ZIP			Ch	ange	Addition
NAMI	ASST. VICE PRESI BRAHIM J. KASHOU	DENT	4. 2 NAME		1					
STREET ADDRESS			4.3 STREET		ODRESS					
C(1Y+S1+7IP	Ponte Vedra Beac	riage ntive	4.4 CITY-ST		ZIP					
TOLE	ASST. SECRETARY	TO THE LANGE TO THE PARTY OF TH	51 TITLE					Ch	ange	Addition
N4ME	CATHERINE N. KAS	HUII	5.2 NAME							
STHEFT ADDRESS	2201 Sawgrass Vi		5.3 STREET	T AD	ODRESS		•			
CITY: ST-ZIP	Ponte Vedra Bch.	TTORE DITAG	5.4 CHTY-5	ST-7	ZIP			<del></del>	<u></u>	
LIFE	. once vedra ben.	, +- LIMBE	61 TITLE					L Ch	ange	Addition
NAME			6.2 NAME							
Cruci Carubbecc	1		6 2 CTDCET	TAD	Andree I					

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