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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P95000081419 (0)**

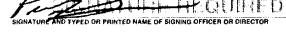
ORCHID ISLAND PROPERTY MANAGEMENT, INC.

Poncipal Prac 1450 74TH AVE VERO BEACH		1450 74TH AV	Mailing Address 1450 74TH AVE SW VERO BEACH FL 32968-9431						
				_		3. Date Incorporated or Qualified 10/20/1995	3a. Date 06/25	of Last Re /1996	eport
2. Principal F 21	face of Business	2a. Mailing A	ddress			4. FEI Number 65-0617001			plied For t Applicable
Suite, Apt 22	#, etc	Suite, Apt	t. #, etc.			5. Certificate of Status Desired	D .	\$8.75 A	
City & Stat	le.	City & Sta	ate			6. Election Campaign Financing	<u></u>	\$5.00	
23	Country	28 		Country		Trust Fund Contribution 8. This corporation has liability for	intandible ta	Added to	
24	25	29	30	•			Yes		100.002,
	9. Name and Address of Cu	rrent Registered Age	nt			10. Name and Address of New Re	gistered Ag	ent	//···
	ig, robert l			81	Name			,	
	B 21ST ST			82	Street Add	ress (P.O. Box Number is Not Acceptate	ole)		
VER	O BEACH FL 32980			-					
				83					
				84	City		<u></u>	85 Zip (Code
		0500 1007 1100 6				poration submits this statement for the p	FL		
office or agent. Fa SIGNATURE	am familiar with, and accept the c	obligations of, Section 6	607.0505, Florida 5	Statute	S	tion's board of directors. I hereby acce		ntment as	registered
	Signaturi typed organizations; of registers			tered Agr	ent signature requ	ired when reinstating) ADDITIONS/CHANGES TO OFFICE	DATE CDC AND C	VEECTOD	C IN 10
12. 10.0	OFFICERS	AND DIRECTORS		1 TITLE		ADDITIONS/CHANGES TO OFFIC		Change	Addition
NAMI	FULFORD, E. PERRY		1	2 NAME			_	,-	trans
STREET ADDRESS	1450 74TH AVE SW		1	.3 STREET	ADDRESS				
CITY ST ZIP	VERO BEACH FL 32968		1	.4 CITY - S	T-ZIP				
TITLE	D			1 TITLE				Change	Addition
NAME	DAVIS, BOB		2	2 NAME					
STREET ACCURESS	1450 74TH AVE SW		2	3 STREET	ADDRESS				
C-FY - ST - ZiF	VERO BEACH FL 32968			4 CITY-	ST - ZIP			7 05	Adves
THLE		L	l l	L1 TITLE			L	Change	Addition
NAV:				.2 NAME	40000000				
STREET ADDRESS					ADDRESS				
CHTY - S1 - ZiP TITLE				4. CITY-	or-Alf		Г	Change	Addition
NAME	1	L		2 NAME	Ĭ		_	• .	
STREET ADDRESS					ADDRESS				
CITY-ST-ZIF				.4 CITY - S					
THE				1 TITLE				Change	Addition
NAME			li l	2 NAME	ŧ				
STHEE ACERESS			5	.3 STREET	ADDRESS				
CHY+ST-ZIP			5	.4 CITY-5	T-2iP				
THTLE			DELETE 6	.1 TITLE				Change	Addition
NAM:			6	.2 NAME					
STREET ADDRESS	\		1.6	.3 STREE	ADDRESS				

64 CITY-ST-2IP

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 on an attachment with an address.

SIGNATURE:



4-14-97

Daytime Phone #

FILED

Apr 22 1997 8:00am

Secretary of State