## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT #	P95000095637	(1)
1 Conversion Name		

MONTEREY, INC.

ALE MENTERFY BOAR	249 MONTEREY ROAD
Principal Place of Business	Mailing Address



A District Address					I (MEILGE) (16 1619) Gitte beite gem. e	**** *****	#1070 E470E 1111		
Principal Place of Business Mailing Address									
249 MONTEREY		249 MONTEREY							
PALM BEACH I	FL 33480	PALM BEACH FL	33480				T 65 - 5 - 1 -	.41 \ Doc	
						3. Date Incorporated or Qualified	3a. Date	of Last Rep	oort
						12/18/1995		<del></del>	
2. Principal Place of Business 2a. Mailing Address				4. FEI Number 23257		L	plied For		
¬ ` Faal				6 506 33 257	<u></u>		ot Applicabl		
Suite, Apt. #, etc.			Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75 Additional Fee Required	
<u> </u>		City & State			6. Election Campaign Financing \$5.00 May I				
City & State					Trust Fund Contribution	Added to Fees			
3		28		Country		B. This corporation has liability for	intangible ta	x under s 1	199.032,
_ Zrp	Country	Zipi	<b></b> -₁	Journy		Florida Statutes  Yes	. <b>⊡</b> No		
1	25	29	30	1		10. Name and Address of New F	Registered A	agent	
	9. Name and Address of Curre	ent Hegistered Ayent		81	Name				
				-					
ROGERS	DOYLE ESQ.			82	82 Street Address (P.O. Box Number is Not Acceptable)				
	al poinciana plaza				<del>_</del>				
	ACH FL 33480			83					
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				84	City		r.	<b>85</b> Zip	Code
							FL		<del></del>
	o the provisions of Sections 607.05 ed agent, or both, in the State of Fid h, and accept the obligations of, Se			above he corp	named corpo poration's box	oration submits this statement for the pu ard of directors. Thereby accept the app	irpose of cha pointment as	registered :	agent. I am
SIGNATURE .		and the second	··· Austria	richard Arm	of side at the female	red wher renestating	DATE		
	Signature, typed or previous name of registered as	AND DIRECTORS		13.		ADDITIONS/CHANGES TO OF	FICERS AND	DIRECTOR	RS IN 12
12.	I	DELI		1 1 10 00	—		[	Change	Additio
TITLE	D		1	1.2 NAMÉ					
NAME	MURRAY, JOHN T				r indexec				
STREET ADDRESS	249 MONTEREY ROAD				LADORESS				
CITY - ST- ZIP	PALM BEACH FL 33480			14C TY				Change	Additio
TITLE	D	□ DEI		2 1 HILE					
NAME	MURRAY, NANCY M		1	2 2 NAME					
STREET ADDRESS	249 MONTEREY ROAD			2.3 STREE	T ADDRESS				
CITY-ST ZIP	PALM BEACH FL 33480			24 Cily-	ST Z.P			Change	Additi
TIBLE	1	☐ DEL	ETE	3 1 BTSE				Unlange	☐ Madrid
				9.2 NAME					

NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4 CITY - ST - ZIP CITY - ST - ZIP Addition Change DELETE 4 1 111.6 TITLE 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CH + ST- ZIP CITY - ST - ZIP ☐ Change Add tion DELETE 5 1 THEF TITLE 5.2 NAME NAME 5.3 STHEET ADDRESS STREET ADDRESS 5 4 CITY - ST - ZIP CITY-ST-2(P ☐ Change ☐ Addition DELETE 6 1 THLE TITLE 6.2 NAME

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or suppliemental annual report is true and accurate and that my signature shall have the same legal effect as if made under certify that the information indicated on this annual report or suppliemental annual report is true and accurate and that my signature shall have the same legal effect as if made under certify that I am an officer or director of the corporation or this receiver or trustee empowered to execute this report as required by Chapter £07, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address

SIGNATURE:

SIGNATURE

SIGNATURE AND VPED OR PRINTED NAME OF SIGNING OFFIGER OR DIRECTOR

Date of the corporation of the corporation or trustee empowered to execute this report as required by Chapter £07, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address

SIGNATURE:

Date of the corporation of the corporation or trustee empowered to execute this report as required by Chapter £07, Florida Statutes I further trustee in the corporation or trustee empowered to execute this report as required by Chapter £07, Florida Statutes I further trustee in the corporation or trustee empowered to execute this report as required by Chapter £07, Florida Statutes I further the corporation or trustee empowered to execute this report as required by Chapter £07, Florida Statutes I further the corporation or trustee empowered to execute this report as required by Chapter £07, Florida Statutes I further the corporation or trustee empowered to execute this report as required by Chapter £07, Florida Statutes I further the corporation or trustee empowered to execute this report as required by Chapter £07, Florida Statutes I further the corporation or trustee em 6 4 CITY - ST - ZIP

6.3 STREE: ADDRESS

NAME

STREET ADDRESS

CR2E034 (12/95)