## 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 # P9600009114 (5)

THREE DEVELOPMENT COMPANY

Principal Place of Business

Mailing Address

## **FILED** Apr 15 1997 8:00am Secretary of State



1555 PALM BEACH LAKES BLVD. W. PALM BEACH FL 33401			1555 PALM BEACH LAKES BLVD. W. PALM BEACH FL 33401-2323					
					3. Date Incorporated or Qualified 01/29/1996	3a. Date of Last	Report	
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number	<del></del>	Applied For	
21		├ <del>-</del> ¬	26			65-0642443 Not Applicable		
Sufte, Apt. #, etc.			Suite, Apt. #, etc.			SR 75 Additional		
22		27	<u> </u>		Certificate of Status Desired	IXI ' '	Required	
City & State		City & State	<b>├</b> ─		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
Zip	Country	Zip	Country		8. This corporation has liability for	8. This corporation has liability for intangible tax under s. 199.032,		
24	25   29   30   30   9. Name and Address of Current Registered Agent		30	Florida Statutes Yes No  10. Name and Address of New Registered Agent				
					10. Name and Address of New Registered Agent  81 Name			
ECCLESTONE, E. LLWYD III 1555 PALM BEACH LAKES BLVD.								
SUN	TE 1100	<b>υ</b> .	82					
W. I	PALM BEACH FL 33401		8:	3			ļ	
2			8	City		FL 85 Zig	Code	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its region office or registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as regist agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.							its registered is registered	
SIGNATURE Signature, typod or printed name of registered agent and tills if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE								
12.4	OFFICERS	AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFF	ICERS AND DIRECTO	RS IN 12	
TITLE	D	☐ DELETÉ	1.1 TITLE		DPT	Change	Addition	
NAME ]	ECCLESTONE, E. LLWYD III		1.2 NAME		D1 1	•	1	
STREET ADDRESS	1555 PALM BEACH LAKES		SUITE 1100 1.3 STREET ADDRESS				ļ	
CITY-ST-ZIP	W. PALM BEACH FL 3340	1	1.4 CITY - ST - ZIP					
TITLE		☐ DELETE	2.13(1LE		c	Change	Addition	
NAME ]	221		2.2 NAME		Normatta Camman			
STREET ADDRESS					annette Gammon			
CITY-ST-ZIP			2.4 CITY - ST - ZIP W		55 Palm Beach Lakes Blvd #1100 st Palm Beach FL 33401			
TITLE	DELETE 3.17		3.1 TITLE		Deach 191 33	Change	Addition	
NAME	3.21		3.2 NAME				i	
STREET ADDRESS			3.3 STREE	1 ADDRESS				
CITY-ST-ZIP		· .	3,4. CITY	- \$1 <b>- 7</b> 1P				
TITLE	DELETE 4.1		4.1 TITLE			☐ Change	Addition	
NAME			4. 2 NAMI	F				
STREET ADDRESS			4.3 STREE	1 ADDRESS				
CITY-ST-ZIP			4.4 CITY	S1-ZIP				
TITLE	DELETE 5.1		5.1 TITLE		·	Change	Addition	
NAME			5.2 NAME					
STREET ADDRESS			5.3 STREE	1 ADDRESS			]	
CITY-ST-ZIP			5.4 CITY-	ST-ZIP				
TITLE		☐ DELETE	6.1 TITLE		14.	Change	Addition	
NAME			6.2 NAME					
STREET ADDRESS			6.3 STREE	ET ADDRESS				
CITY-ST-ZIP			6.4 CHY-	S1-ZIP				
	by certify that the information sur	plied with this filing does not qualif			stated in Section 119,07(3)(i), Florida Statu	ies. I further certify tha	at the	

I am an officer or director of the corporation or the receiv appears in Block 12 or Block 13 if changed, or on an att all annual report is trud and accurate and that my signature shall have the same legal effect as if made under oath; that if trustee dispowered to effectle this report as required by Chapter 607, Florida Statutes; and that my name them with an address.