PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **P96000017046**1. Corporation Name

OAK SHORES DEVELOPMENT CORPORATION

FILED Apr 29, 1999 8:00 am Secretary of State

04-29-1999 90207 001 ***150.00

Principal Place of Business Mailing Address						}			
2831 RINGLIN	ig blvd.	2831 RINGLING BLVD.	2831 RINGLING BLVD.			ļ			
SUITE 2130		SUITE 213D				DO NOT WRITE IN THE SPACE			
SARASOTA F	SARASOTA FL 34237	TA FL 34237			DO NOT WRITE IN THIS SPACE				
						3. Date Incorporated or Qualifed 02/23/1996			{
2. Principal Place of Business 2a. Mailing Address						4. FEI Number			Applied For
21	26					65-0645578		 	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.				T		\$8.7	5 Additional
22		27				5. Certifcate of Status Desired		Fee	Required
City & State		City & State	k			6. Election Campaign Financing			00 May Be
23		28				Trust Fund Contribution		Adde	ed to Fees
—, Zip	Country	Country Zip		Country		8. This corporation owes the curre	nt year inta		
24	[25]		10			Personal Property Tax.		Yes	□No
	9. Name and Address of Curren	it Registered Agent		-	M	10. Name and Address of New R	egistered A	gent	
SHEPHERD, DEVON D			81 Name						
	31 RINGLING BLVD.	÷	82			ss (P.O. Box Number is Not Accepta	ole)		
	ITE 213D			83					
SA	rasota FL 34237			84	City			85 Z	ip Code
				} ``}	•		FL	1_1_	·
Office of	nt to the provisions of Sections 607.050 registered agent, or both, in the State am familiar with, and accept the obligate	of Florida. Such change was aut tions of, Section 607.0505, Florid	horized da Stati	i by ti utes.	he corporation	is board of directors. I hereby accep	the appoin	tment as	registered
12.		ID DIRECTORS	13.		-3	ADDITIONS/CHANGES TO OFF	ICERS AN	DIREC	TORS IN 12
TITLE	PST	☐ DELETE	1.1 71111					Chang	ge Addition
NAME	SHEPHERD, DEVON D		1.2 N	ME	1				}
STREET ADDRES	2959 BAY ST		1		ADDRESS				Ì
CITY-ST-ZIP	SARASOTA FL 34237		1.4 CT	1.4 CITY-ST-ZIP					1
TMLE	☐ DELETE			2.1 TITLE				Chang	e Addition
NAME			2.2 NA	2.2 NAME					}
STREET ADDRES	es		2.3 \$1	REET/	ADDRESS				{
CITY-ST-ZIP			2.40	TY-ST	-ZIP				
TITLE		DELETE	3.1 70					Chang	ge
NAME	}		3.2 NA	ME	}				}
STREET ADDRES	ss		3.3 51	REET	ADDRESS				}
CITY-ST-ZIP	1		3.4. CI	TY-ST	-ZIP				
HITLE	1	☐ DELETE	4.1 T/I	ΓLE				Chang	ge Addition
-	}		4.2 N	AME	}				
== (ADORES	ss		4.3 \$1	REET	ADORESS				
ST-ZIP	1		4.4 CF	TY-ST-	ZIP				
	T	☐ DELETE	5.1 TITLE		T			Chang	ge
_			5,2 N	ME	}				}
i ADDRES	iš		5.3 ST	REET A	ADDRESS				}
ST-ZIP	<u>}</u>			TY-ST-	ZIP				
-		DELETE		6.1 TITLE				☐ Chang	ge 🗀 Addition
-	}		6.2 NA	ME	1]
I ADDRES	ss)		6.3 ST	REET A	ADORESS				}
ST-ZIP	_{		6.4 CT	TY-ST-	ZIP	4: - 440 07/01/1) Florido Statutas I			

I 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 informati indicated on this annual report or supplemental annual report is titue 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 employered 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, with all offer like empowered.

TEMATURE:

CR2E034 (11/98)