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

PROFIT CORPORATION ANNUAL REPORT

1998

indicated on this annual report officer or director of the corporation of the corporation



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name P96000100515 (1)

CUMBERLAND PROPERTIES, INC.

Principal Place of Business

Mailing Address

FILED Jan 23 1998 8:00am Secretary of State



1104 N. COLLIER BLVD. 264 ROCK HILL COUR MARCO ISLAND FL 34145 MARCO ISLAND FL 34			5				
444100 1001		US			DO NOT WRITE IN THI	S SPACE	
					3. Date Incorporated or Qualified	_	
4.5		TA MANUAL AND			12/12/1996		
	Pock HillCt	2a. Mailing Address	400		4. FEI Number		plied For
21 044		26 1.0. Bax/	,,,,		59-3430859		t Applicable
Sulte, Apt. #, etc. Suite, Apt. #, etc. 22 27					5. Certificate of Status Desired	\$8.75 / Fee Re	
23 MARCO IS AND FL 23 MARCO IS A			Nd, i		6. Election Campaign Financing Trust Fund Contribution	\$5.00 Added	, ,
24 Zig 34	145 25 WILLER	29 34146 3	io Coll	MER	This corporation owes or has paid the operation of the personal Property Tax due June 30.	☐ Yes 🚺	rogible 2 4lo
9. Name and Address of Current Registered Agent					10. Name and Address of New Registers	d Agent	
GREUSEL, JAMIE B				Name			
1104 N. COLLIER BLVD.			82	Street Ad	ddress (P.O. Box Number is Not Acceptable)		_ _
C/O BERRY & GREUSEL					,		
MARCO ISLAND FL 34145			83				
			84	City	F	85 Zip (Code
11 Dureuppt	to the provisions of Sections 607 0502	and 607 1508 Florida Statutor	the show	a.namad.o			e registered
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 registered 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 registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.							
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable (NOTE:	Regislered Age	ent signature re	quired when reinstating) DATE		
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTOR	IS IN 12
TITLE	DPC	☐ DELETE	1.1 TITLE			Change	Addition
NAME	STORM JR, RICHARD		1.2 NAME				
STREET ADDRESS	264 ROCK HILL COURT		1.3 STREET	ADDRESS			
CITY-ST-ZIP	MARCO ISLAND FL		1.4 CITY-S	T-ZIP			
TITLE	D	DELETE	2.1 TITLE		· · · · · · · · · · · · · · · · · · ·	Change	Addition
NAME	LAVIN, FRANCES S	V	2.2 NAME				
STREET ADDRESS	17918 E COVIES AVE		2.3 STREET	ADDRESS			
CITY-ST-ZIP	FOXFIELD CO		2. 4 CITY-5	ST-ZIP			
TITLE	D	DELETE	3.1 TITLE	51 EH		☐ Change	Addition
NAME	RUTTKAMP, LAUREN E	32 N					
STREET ADDRESS	46 OLD WAGON ROAD		3.3 STREET	ADDRESS			
CITY-ST-ZIP	WILTON CT		3.4 CITY-S	- 1			
TITLE	DST	DELETE	4.1 TITLE			☐ Change	Addition
NAME	PULA, DAVID S		4. 2 NAME			•	
STREET ADDRESS	45 SWEET FERN DRIVE		4.3 STREET	ADDRESS			
CITY-ST-ZIP	WEST SPRINGFIELD MA		4.4 CITY-S	ľ			
TITLE	D	DELETE	5.1 TITLE			☐ Change	Addition
NAME	SL ATER, RALPH E	* T	5.2 NAME				
STREET ADDRESS	30 STAWBERRY RIDGE ROAD		5.3 STREET	ADDRESS			
City-St-ZiP	RIDGEFIELD CT	5.4 Cit					
TITLE	D	☐ DELET E	61 TITLE			Change	Addition
NAME	LAVIN, CHRISTOPHER J		6.2 NAME				
STREET ADDRESS	P.O. BOX 49 N/A		63 STREET	ADDRESS			
CITY-ST-ZIP	WILTON CT		6.4 CITY-S]
14. Thereby c	ertify that the information supplied with	this filing does not qualify for	the exemp	tion stated	in Section 119.07(3)(i), Florida Statutes. I further	certify that the	information
officer or	on this annual report or supplemental director of the corporation or the received	minual report is true and accur er of trustell empowered to ex	ate and the ocute this	at my signa report as re	ature shall have the same legal effect as if made equired by Chapter 607, Florida Statutes; and the	under oath; tha it my name api	pears in