

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

FILED
May 15 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000101347 (8)

1. Corporation Name

STERLING LIVE OAK, INC.

Principal Place of Business

209 PHIPPS PLAZA
PALM BEACH FL 33480

Mailing Address

209 PHIPPS PLAZA
PALM BEACH FL 33480

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/16/1996

4. FEI Number

65-0710373

Applied For

Not Applicable

5. Certificate of Status Desired

☒ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.

☒ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.
22 City & State
23 Zip
24 Country
25

26 Suite, Apt. #, etc.
27 City & State
28 Zip
29 Country
30

9. Name and Address of Current Registered Agent

KOSOY, A. DAVID
209 PHIPPS PLAZA
PALM BEACH FL 33480

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL 85 Zip 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 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 of officer or director of corporation or registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

4-8-98

12. OFFICERS AND DIRECTORS

TITLE P
NAME KOSOY, A. DAVID
STREET ADDRESS 209 PHIPPS PLAZA
CITY-ST-ZIP PALM BEACH FL 33480

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13.

1.1 TITLE DP
1.2 NAME A. David Kosoy
1.3 STREET ADDRESS 209 Phipps Plaza
1.4 CITY-ST-ZIP Palm Beach, Florida 33480

2.1 TITLE DV
2.2 NAME Duane J. Stiller
2.3 STREET ADDRESS 209 Phipps Plaza
2.4 CITY-ST-ZIP Palm Beach, Florida 33480

3.1 TITLE DVS
3.2 NAME Denis Beaulieu
3.3 STREET ADDRESS 209 Phipps Plaza
3.4 CITY-ST-ZIP Palm Beach, Florida 33480

4.1 TITLE DV
4.2 NAME Richard Jerman
4.3 STREET ADDRESS 209 Phipps Plaza
4.4 CITY-ST-ZIP Palm Beach, Florida 33480

5.1 TITLE DT
5.2 NAME Geri Marchessault
5.3 STREET ADDRESS 209 Phipps Plaza
5.4 CITY-ST-ZIP Palm Beach, Florida 33480

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. 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 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.

CR2E034 (10/97)