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

**PROFIT** CORPORATION ANNUAL REPORT 1999



Secretary of State DIVISION OF CORPORATIONS

FLORIDA DEPARTMENT OF STATE

Katherine Harris

## DOCUMENT # P96000101861

1. Corporation Name

COURTNEY PLACE DEVELOPMENT, INC.

Principal P ace of Business Mailing Address										18 11181 1181 1381
250 INTERNATIONAL PARKWAY		250 INTERNATIONAL PARKWAY								
SUITE 220		SUITE 220								
HEATHROW FL	HEATHROW FL 32746	THROW FL 32746				DO NOT WRITE IN THIS SPACE				
							3. Date Incorporated or Qualifed 12/18/1996			
2. Principal Place of Business 2a. Mailing Address							4. FEI Number		1	Applied For
21						_	59-3405788			Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired	$\nabla$		A dditional	
22		27				S. Cormesto or Comment	·····	Fee I	Required	
City & Etate	<del>e</del>	City & State				6. Election Campaign Financing			0 May Be	
23		28				Trust Fund Contribution		Added	d to Fees	
Zip	Country	Zip Country				8. This corporation owes the current year intangible				
24	25 29 30			_			Personal Property Tax.		☐ Yes	□No
Name and Address of Current Registered Agent					Maria		10. Name and Address of New Registers d A			
OCH	ED GEDALD D			81	Name	;			_	
OGIER, GERALD D 250 INTERNATIONAL PARKWAY				82	Street	Addre	ss (P.O. Bo) Number is Not Accepta	able)		
	E 220									
	THROW FL 32746									
ПЕА	11111011 FE 32740			84	City				85 Zip	Code
			· <del></del> -					F		
11. Pursuant	to the provisions of Sections 607.0502 egistered agent, or both, in the State of	and 607.1508, Florida Statu	tes, the a	bove i hv	-named	d corpo	ration submits this statement for the	purpose of the apro	ot changing i ointment as	ts registered registered
agent. [a	m familiar with, and accept the obligat	ons of, Section 607.0505, FI	orida Stati	utes.			, , , , , , , , , , , , , , , , , , , ,			
SIGNATURE						_				
	Signature, typed or printed na ne of registered agent			Agen	t signature	req: ired	when reinstating)	DATE	ND DIDECT	TOUS IN 12
12.	OFFICERS ANI	DELETE	13.				ADDITIONS/CHANGES TO OF	FICERS -	Change	
TITLE	DP OSERVED S	□ DELE!E	1.1 70						Change	
NAME OGIER, GERALD D				1.2 NAME						
STREET ADDRESS	250 INTERNATIONAL PARKWAY	SIE 220	1.3 STREET ADDR			3				
CITY-ST-ZIP	HEATHROW FL 32746	DELETE	_	TY-S1	r-zip				Change	e Addition
TITLE	DVP	DELETE		2.1 TITLE					Change	, radition
NAME	MCCLINTOCK, JOHN H			2 2 NAME						
STREET ADDRESS	250 INTERNATIONAL PARKWAY	SIE 220 235		2 3 STREET ADDRESS		3				
CITY-ST-ZIP				ITY-S	T-ZIP				Change	e Addition
TITLE	VPST	☐ OELETE	3.1 TI			1			- Change	
NAME	SCHAFFER, JOHN		32 N/							
STREET ADDRESS	250 INT'L PKWY #220				ADDRESS	3				
CITY-ST-ZIP	HEATHROW FL		_	ITY-S	T-ZIP	<b>↓</b>			Change	e Addition
TITLE	VP	☐ DELETE	4.1 TI						Change	e
NAME.	MCDANIEL, DAVID		4.2 N							
STREET ADDRESS			4.3 5	TREET	ADDRESS	5				
CITY-ST-ZIP	HEATHROW FL	· <del></del>		ITY-S1	r-ZIP					a Addition
TITLE		☐ DELETE	5.1 TI						Change	e 🗍 Addition
NAME			5 2 N/							
STREET ADDRESS					ADDRESS	5				Į
CITY-ST-ZIP		. <u>_</u>		TY-SI	r-ZIP	<u> </u>				- FIALES
TITLE	`	☐ DELETE	6.1 🏗						Chang	e Addition
NAME			6.2 N							
STREET ADDRESS			635	TREET	ADDRESS	3				į
1	l		<b>I</b>	m		1				ľ

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 recenter 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, with all other like empowered.

SIGNATURE: