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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9700005686 (5)

CORONADO DEVELOPMENT, INC.

FILED

98 APR 15 PM 3: 28

SECRETARY OF STATE TALLAHASSEE. FLORIDA



Principal Place of Business		Mailing Address		- 3 (CONTACT ALE CONTACTOR SOLIT CONTACTOR CON	
2105 PARK AVENUE NORTH WINTER PARK FL 32789		2105 PARK AVENUE NORTH			
		WAINTER PARK FL 32789			
				DO NOT WRITE IN THIS	SPACE
				3. Date Incorporated or Qualified	
9 Principal P	lace of Rusiness	2a. Mailing Address		01/17/1997 4. FEI Number	Applied For
2. Principal Place of Business		A. " A		59-3427588	Applied For Not Applicable
Suite, Apt. #, etc.		26 1.3 BOX 4961 Suite, Apt. #, etc.			\$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28 orlandorf	<u>2</u>	Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the cu	urrent year intangible
24	25	29 3280 Z -496 30		Personal Property Tax due June 30.	Yes No
	g. Name and Address of Curre	nt Registered Agent		10. Name and Address of New Registered	Agent
B&C CORPORATE SERVICES OF CENTRAL FLORIDA 390 N ORANGE AVENUE			81 Name		
			82 Street Ad	dress (P.O. Box Number is Not Acceptable)	·
SUITE 1100				500002492 -04/17/98	01100 - 011
ORLANDO FL 32801			[83]	****158.75	
			84 City		BE Zin Code
				FI	-
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					
12	Signature, typed or printed name of registered ag	NO DIRECTORS	egistered Agent signature rec	aurod when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTORS IN 12
12.	D	DELFTE	* 1		Change Addition
NAME	PEPPER, DONNA D	_	μ	P/S/T	4 . –
STREET ADDRESS	120 INTERNATIONAL PKWY,	STF 220	תן ווייייון	onna D. Pepper	
CITY-ST-ZIP	HEATHROW FL 32746		1.4 City-St-Zip IA	105 Park Ave., N.	
TITLE		☐ DELETE	2.1 Title D	inter Park, FL 32789	Change Addition
NAME			221411		•
STREET ADDRESS				ony B. Johnson	
CITY-ST-ZIP				105 Park Ave., N.	
TITLE		☐ DELETE	3.1 TITLE	inter Park, FL 32789	Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3 3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY - ST - ZIP		
TITLE		☐ DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		1
CITY-ST-ZIP		T accident	5 4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		V 41 1
City-St-7iP			64 CiTY-ST- ZiP		11 '

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 trusted 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.

1/10/00 MAT -00 0000