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

**PROFIT CORPORATION ANNUAL REPORT** 

1998



LLORIDA DEPARTMENT OF STATE

Sandra B. Meytham Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P97000049600 (4)

OCEAN VILLAGE RENTALS, INC.

APPROVED AND FILED

98 JUN -5 PM 4: 22

SECRETARY OF STATE TALLAHASSEE, FLORIDA



Principal Plac	e of Business	Mailing Address			E SEGUIDAL TIO INITE INDITE OFFICE ONLY OF	Pros medem emela meter ami	iti dali ikal
229 CARDINAL DRIVE P.O. BOX 2107							_
ORMOND BE	ACH FL 32176	ORMOND BEACH FL 32	2175			THISGRACE	
					3. Date Incorporated or Puglified 85	.00 ****1	
					06/02/1997	. ይነርጋ - ጥጥጥጥ 1	03.00
	lace of Business	2a. Mailing Address			4. FEI Number	Ap	plied For
	arlington way	26					t Applicable
Suite, Apt	#, etc. /	Suite, Apt. #, etc.	Suile, Apt. #, etc.		5. Certificate of Status Desired	g \$8.75 A	I
City & Stat		City & State				Fee Re	<del></del>
23 ORMIOND BEACH, FL. 28		l-n ′	City of Gidlo		Election Campaign Financing     Trust Fund Contribution	<b>\$5.00</b> Added t	•
Zip	Country	Ζψ	Country	/	8. This corporation owes or has paid t	···	
24 321	176 25 Volusin	- <sub>29</sub>	30		Personal Property Tax due June 30		No
	g. Name and Address of Curren	t Registered Agent		,	10. Name and Address of New Regis	ered Agent	
	owalski, judy		81	Name 7	DR. Nick SILEO		
229 CARDINAL DRIVE					dress (P.O. Box Number is Not Acceptable)	<del></del>	
, 10F	RMOND BEACH FL 32176		83	220	ARlington WAY		
•			63		,		
			84	City	MOND BEACH,		Code
11. Pursuant	to the provisions of Sections 607 0502	2 and 607.1508. Florida Statu	nes, the abov	e-named co	propration submits this statement for the purp	FL   <i>多み</i> ose of changing its	s registered
office or r	egistered yout, or both, in the Solic om familiar with and account the biline	of Florida, Such change was diens of Section 607 0505, E	authorized bi lorida Statute	y the corpor s	ration's board of directors. Thereby accept the	e appointment as	registered
SIGNATURE	Midan N. Sila						
	·	المشمول والأراوا والا	II Registered Ag	ent signature rec	quired when reinstating) [	DATE	f
12.	OFFICERS AND	DEFETE	13.		ADDITIONS/CHANGES TO OFFICER	S AND DIRECTOR: Change	S IN 12
TIPLE NAME	PRESIDEDI DIRECTO	DECEMBER 1	11 TITLE 12 NAME		DANSIDENT/DIRECTURE DR. NICK SILED	Change	LI Addition 13
STREET ADDRESS	229 GANDINA	DRIVE		ADDRESS	220 ARLINGTON WAY		į
CITY+ST-ZIP	PRESIDENT/DIRECTO JUDY KOWALSK 229 CARDINAL ORMOND BETKH, FL	1.33176	1.4 D(TY - S	ST. 7IP	RMOND BEACH, FL. 3.	2176	
TITLE	DECETE 2110		21 10 LE	71 2.11		☐ Change	Addition
NAME			2 2 NAME				
STREET ADDRESS			2 3 STREET	ADDRESS			ļ
CITY-ST-ZIP			2. 4 CITY-	SI - ZIP			
TITLE		☐ DEUF IE	3.1 TillE			L Change	Addition
NAME			3.2 NAME				
STREET ADDRESS			3 3 STREET				
CITY-ST-ZIP TITLE		DELETE	3.4. CHY 4.1 THLE	SI-ZIP		Change	Addition
NAME		E.J OLIVIC	4. 2 NAME			C. Orizingo	7.00
STREET ADDRESS				ADDRESS			
CITY-ST-ZIP			4.4 CITY - 5				İ
TITLE		DELLTE	5.1 THILE			Change	Addition
NAME			5.2 NAME		, ()		
STREET ADDRESS			5.3 S1RFE1	ADDRESS	\ \h \ \\ \'		
CITY-ST-ZIP			5.4 CITY - S	1- ZIP	7.1012		
TITLE		☐ DELETE	6.1 T(1)LE		$\mathcal{O}_{\mathfrak{o}}$ , , ,	L Change	Addition
NAME			6.2 NAME		Γ-		
STREET ADDRESS			6.3 STREET				
CITY-ST-ZIP		Or this fifty as also as a section with a	6.4 CITY - 5	1-ZIP	Castian 110 07/2001 Florida Cost day 1 funt	bar and the shart the	

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 suppliemental 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 or min attachment with an address.