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

PROFIT CORPORATION ANNUAL REPORT

1998

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

**FILED** 

May 14 1998 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000080139 (3)

HAWK'S CAY RENTAL MANAGEMENT, INC.

Principal Place of Business Mailing Address MILE MARKER 61 MILE MARKER 61 DUCK KEY FL 33050 DUCK KEY FL 33050 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 09/16/1997 2. Principal Place of Business 2a. Mailing Address FEI Number Applied For 07 966 44 150 E. SAMPLE ROAD Not Applicable 21 Suite, Apt. #, etc Suite, Apt #, etc. \$8.75 Additional 5. Certificate of Status Desired 200 Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 POMPANO BEACH FL Trust Fund Contribution Added to Fees Country Zip 8. This corporation owes or has paid the current year Intangible 37064 USA Yes ☐ No Personal Property Tax due June 30. 24 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 EDGAR, CHARLES W III DONALD H. WOHNSON LEVINE, FRANK & EDGAR, P.A. 82 Street Address (P.O. Box Number is Not Acceptable) 3000 PGA BLVD., STE. 500 156 E. SAMPLE 83 PALM BEACH GARDENS FL 33408 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 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, and accept the objection of Section 607.0505, Florida Statutes. James signature required when reinstalling) SIGNATURE 4-24-58 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. Change Addition TITLE DELETE 1.1 TITLE JOHNSON, DONALD H NAME 1.2 NAME 150 E. SAMPLE RD., STE. 200 STREET ADDRESS 1.3 STREET ADDRESS POMPANO BEACH FL 33064-3550 CITY - \$T - ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TIBLE NAME 22 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2 4 CITY - ST - ZIP DELETE Change Addition TITLE 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4 CITY - \$7 - ZIP CITY-ST-ZIP TITLE DELETE Change Addition 4.1 TITLE 4. 2 NAM6 STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP CITY-ST-ZIP DELETE 5.1 TITLE ☐ Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS 5 4 CITY-ST-ZIP CITY-ST-ZIP TITLE DELETE 6.1 THILE Change Addition NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CiTY - ST- ZIP CITY-ST-ZIP ■ 64 CHT-51-2IF ]

14. Thereby 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.