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

PROFIT **CORPORATION ANNUAL REPORT**

1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000080791 (1)

BALMY BEACH RETIREMENT HOME, INC.

FILED Apr 14 1998 8:00am Secretary of State



Principal Place of Business Mailing Address				- I TREATOUR ING RESIN COUNT DUING BOSSE DESTIT ORIGIN AUSTE DUING SOUR COURT INST FURT	
1030 BALMY	BEACH DR	1030 BALMY BEACH DR			
APOPKA FL	32703	APOPKA FL 32703		DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualified	SPACE
				09/17/1997	
2. Principal P	lace of Business	2a. Mailing Address	·	4. FEI Number	Applied For
21		26		59-3475290	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			\$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & State	6	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the c	
24	25 9. Name and Address of Curre	29	30	Personal Property Tax due June 30.	Yes No
LE		III Negistered Agent	81 Name	10. Name and Address of New Registered	1 Konut
	BRUN, PIERRE			MIERRE LERRUI	V
	30 BALMY BEACH DR		82 Street Ac	dress (P.O. Box Number is Not Acceptable)	H BRIVE
AP	OPKA FL 32703		83	30 BALMY BEAC	A DETUC
			63		
			84 City	A Pun	85 Zip Code
## D		00 10074100 51 11 0		<i>forka</i> Fi	
office or r	to the provisions of Sections 607.056 egistered agent, or both, in the State	ย2 and 607.1508, Florida Statute e of Florida. Such change was ย	es, the above-named co authorized by the corpor	orporation submits this statement for the purpose ration's board of directors. I hereby accept the ap	of changing its registered
agent. I a	m familiar with, and accept the oblig	gations of, Section 607.0505, Fic	orida Statutes.		,
SIGNATURE		·			
12.	Signature, typod or printed name of registered ng	VD DIRECTORS	E: Registered Agent signature red	ADDITIONS/CHANGES TO OFFICERS AN	ID DIDECTORS IN 12
TITLE	D	DELETE		RESIDENT / DIRECTOR	Change Addition
NAME	LEBRUN, PIERRE			PIERRE LEBRUN	E oumbo C vocation
STREET ADDRESS	1030 BALMY BEACH DR		1.3 STREET ADDRESS	1030 BALMY BEACH D	R.
CITY-ST-ZIP	APOPKA FL 32703		1.4 CITY-ST-ZIP	APOPKA FL. 32703	
TITLE	D	☐ DELETE	2.1 TITLE	ICE - PRESIDENT/DIRECTO	Change Addition
NAME	LEBRUN, ENID	-	22 NAME	EN. LEROUS	
STREET ADDRESS	1030 BALMY BEACH DR		2 3 STREET ADDRESS	050 BALMY BEACH OF	₹.
CITY-ST-ZIP	APOPKA FL 32703		2. 4 CITY-ST-ZIP	APAPKA FI 32070	_
TITLE		☐ DELETE	3,1 TITLE	1100	Charge Addition
NAME		•	3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY+ST-RIP		
TITLE		DELETE	4.1 TITLE	SECRETARY/TREASURE	Change Addition
NAME			4.2 NAME	MICHEL DAUPHIN	
STREET ADDRESS			4.3 STREET ADDRESS	10 20 RAI MIL BEACH	OR.
CiTY-ST-ZIP			4.4 CITY+ST-ZIP	1030 BALMY BEACH	ر تج
TITLE		☐ DELETE	5.1 TITLE	118-01-13-13	Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY - ST - ZIP			5 4 CITY-ST-ZIP		
MLE		DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY - ST - ZIP		
	ertify that the information supplied y	with this filing doos not qualify to		in Section 119 07(3)(i) Florida Statutes, I further of	sortifu that the information

Indicated on this annual report or suppliers with this filling does not quality for the exemption stated in Section 119.07(3)(t), Florida Statutes. I further certify that the informatic indicated on this annual report or supplicing that 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 open attachment with an address.