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 # P97000087602 (3)

FLORIDA VILLAS INTERNATIONAL INC.

Principal Place of Business Mailing Address										I fabili	N AND HOUSE HOUSE		(1 20 (0) (0))	Thoin bill bi	
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SARASOTA FL 34236					SARASOTA FL 34236						DO N	OT WOITE	INI TIJIC C	DACE	
1										DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified					
										10/09	*				
2.	Principal P	lace of Busi	noss	2a. Mailing	2a. Mailing Address					I. FEI Num	ber	2//		MA	pplied For
21				26	26					35-1	280 T	766		F	ot Applicable
Suite, Apt. #, etc.				Suite,	Suite, Apl. #, etc.					Cortificat	e of Status De	neirod		\$8.75	Additional
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23	Zip Country			28 Zip	28 Co						d Contributio				to Fees
24	zip	_	25	29	30				Į ē	8. This corporation owes or has paid the current year li Personal Property Tax due June 30. Yes					tangible ⊒No!
241	9. Name and Address of Current Reg								10. Name and Address of New Registered Agent						
EASTOE, MICHAEL G								Name							
1900 MAIN STREET STE 200							82	2 Street Address (P.O. Box Number is Not Acceptable)							
SARASOTA FL 34236									Address (P.O. BOX N	iumper is Not	Acceptabl	0)		1
074700 (A 1 2 0 1 2 0 0															
								- Cit.					····	Tes 7in	Code
							84	City					FL	85 Zip	Code
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 chan 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 agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.												changing i pintment as	ts registered registered		
SI	GNATURE	*****		e 6							DATE				
Signature, typed or printed name of registered a 12. OFFICERS A			AND DIRECTORS		gistered Agent signature required 13.				S/CHANGES	TO OFFIC		DIRECTOR	3S IN 12		
TITLE						111	ITLE		ME	Sides	1	4.		Change	Addition
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CITY-ST-ZIP 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 arrival 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 13 if changed, or or an example ment with an address.

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

61 TITLE

6.2 NAME

DELETE

DELETE

TITLE

NAME

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

G. EASTOK

Addition

FILED

Feb 26 1998 8:00am

Secretary of State