

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 04, 1999 8:00 am
Secretary of State

05-04-1999 90064 030 ***150.00

DOCUMENT # P97000088936

1. Corporation Name
VISIONS OF PARADISE, INC.

Principal Place of Business
82205 OVERSEAS HIGHWAY
ISLAMORADA FL 33036

Mailing Address
82205 OVERSEAS HIGHWAY
ISLAMORADA FL 33036



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
10/14/1997

4. FEI Number
65-0794468

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Election Campaign Financing ☐ \$5.00 May Be Added to Fees

8. This corporation owes the current year Intangible Personal Property Tax. ☐ Yes ☒ No

2. Principal Place of Business

21 82189 Overseas Hwy
Suite, Apt. #, etc.

22 City & State
Islamorada FL

23 Zip Country
33036 Monroe

2a. Mailing Address

27 82189 Overseas Hwy
Suite, Apt. #, etc.

28 City & State
Islamorada FL

29 Zip Country
33036 Monroe

9. Name and Address of Current Registered Agent

LOWN, LINDA
82205 OVERSEAS HIGHWAY
ISLAMORADA FL 33036

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83 82189 Overseas Highway
84 City
FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1503, 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	VP	DELETE
NAME	ERIKSEN, ERIK	
STREET ADDRESS	1200 CACTUS ST.	
CITY-ST-ZIP	KEY LARGO FL 33037	
TITLE	P	DELETE
NAME	LOWN, LINDA	
STREET ADDRESS	6 S. BLACKWATER LANE	
CITY-ST-ZIP	KEY LARGO FL 33037	
TITLE	S	DELETE
NAME	TULLY, SUZANNE	
STREET ADDRESS	182 GULFVIEW DR.	
CITY-ST-ZIP	ISLAMORADA FL 33036	
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	T Luther Meeks	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	117 Cottonwood Dr.	
1.3 STREET ADDRESS	Key Largo, FL 33037	
1.4 CITY-ST-ZIP		
2.1 TITLE	VP Philip Gald	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	182 Alhambra Dr.	
2.3 STREET ADDRESS	Key Largo, FL 33037	
2.4 CITY-ST-ZIP		
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 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 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, with all other lines empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)

0150465