


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

01182

FILED
Mar 17, 1999 8:00 am
Secretary of State

03-17-1999 90150 007 ***150.00

PROFIT CORPORATION ANNUAL REPORT 1999				FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P98000024216					
1. Corporation Name WATERFORD IN VERO, INC.					
Principal Place of Business 756 BEACHLAND BOULEVARD VERO BEACH FL 32963			Mailing Address 756 BEACHLAND BOULEVARD VERO BEACH FL 32963		
2. Principal Place of Business 21 P.O. Box 81135		2a Mailing Address 26 P.O. Box 81135		3. Date Incorporated or Qualified 03/13/1998	
Suite, Apt. #, etc. 22		Suite, Apt. #, etc. 27		4. FEI Number 65-0896099	
City & State 23 Boca Raton FL		City & State 28 Boca Raton FL		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
Zip Country 24 33481 25 USA		Zip Country 29 33481 30 USA		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
9. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE FL 32301-2525			8. This corporation owes the current year intangible Personal Property Tax. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
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 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 obligation of, Section 607.0505, Florida Statutes. SIGNATURE <i>David A Rustine</i> <small>Signature, typed or printed name of registered agent and title if applicable</small>			10. Name and Address of New Registered Agent		
			81 Name David A Rustine		
			82 Street Address (P.O. Box Number is Not Acceptable) 4770 NW 2nd Ave Suite D		
			83		
84 City Boca Raton 85 Zip Code 33431			DATE 2/22/99		
12. OFFICERS AND DIRECTORS					
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12					
1:1 TITLE P S D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition					
12 NAME DAVID A Rustine					
13 STREET ADDRESS 4770 NW 2nd Ave Suite D					
14 CITY-ST-ZIP Boca Raton FL 33431					
2:1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition					
2:2 NAME					
2:3 STREET ADDRESS					
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)(r), 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 like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

David A Rustine 2/22/99 (561) 997-8000

Date

Daytime Phone #

CR2E034 (11/98)