## 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

## DOCUMENT # P98000046446

1. Corporation Name

OCEAN CREST DEVELOPMENT, INC.

## FILED Apr 06, 1999 8:00 am Secretary of State

04-06-1999 90059 029 \*\*\*150.00



							l <b>title t</b> ik l <b>e</b> k
Principal Place of Business Mailing Address						IN BIBLO BILLI DINI	i Aibin atif Iabi
221 GLENGARRY AVENUE MELBOURNE BEACH FL 32951  221 GLENGARRY AVENUE MELBOURNE BEACH FL 32951  MELBOURNE BEACH FL 32951					DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualifed		
					05/22/1998		
Principal Place of Business     2a. Mailing Address					4. FEI Number	A	pplied For
21 26					59-3511768	N	ot Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc. 27					5. Certificate of Status Desired	\$8.75 Additional. Fee Required	
City & State		City & State	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
23 Zip	Country	Zip	Count	rv	This corporation owes the current year		10.1000
	25	29	30		Personal Property Tax.	Yes	XVo
24 25 29 3 9. Name and Address of Current Registered Agent			30]		10. Name and Address of New Registere		7
9. Name and Address of Current Registered Agent				1 Name	10. 12.110 4114 / 10.000 01.110 11.110		
WALLIS, MICHAEL M					_ <del></del>		
1221 EAST NEW HAVEN AVENUE			8		Idress (P.O. Box Number is Not Acceptable)	_:	
MELI	BOURNE FL 32901	•	8	3	· · ·	,	
,	The second state of		8	4 City	F	<b>L</b> 85 Zip	Code
office or re	to the provisions of Sections 607 0502	f Florida. Such change was a	uthorized t	y the corpora	proration submits this statement for the purpose ation's board of directors. I hereby accept the appropriate the statement of the province of the statement of	of changing its pointment as re	s registered egistered
SIGNATURE							
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Re				ent signature requ	uired when reinstating) DATE		
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS		
TITLE {	D	☐ DELETE	1.1 TITLE	}		☐ Change	☐ Addition {
NAME	PREFONTAINE, HENRI			<b>:</b>			Ì
STREET ADDRESS 221 GLENGARRY AVENUE			1.3 STRE	ET ADDRESS			
CITY-ST-ZIP	MELBOURNE BEACH FL 32951		1.4 CITY	ST-ZIP			
TITLE	D	☐ DELETE	2.1 TML			☐ Change	Addition
NAME	Prefontaine, Jennie		2.2 NAMI	:			į
STREET ADDRESS	221 GLENGARRY AVENUE		2.3 STRE	ET ADDRESS			
CITY-ST-ZIP	MELBOURNE BEACH FL 32951			-ST-ZIP			
TITLE	VICE PRESIDENT DELETE					☐ Change	☐ Addition
NAME	DAVID L BRYANT	- 1	3.2 NAM	<b>!</b>			
STREET ADDRESS	s 4280 Dow RD Suite 108			ET ADDRESS			
CITY-ST-ZIP	MELBOURNE F	L 32934	3.4. CITY	-ST-ZIP			
TITLE		☐ DELETE	4.1 TITLE			Change	☐ Addition
NAME	•		4, 2 NAM	E			ļ
STREET ADDRESS			4.3 STRE	ET ADDRESS			
CITY-ST-ZIP			4.4 CITY	ST-ZIP			1
TITLE		☐ DELETE	5.1 TITLE			Change	☐ Addition
NAME			5.2 NAM	<b>:</b> [	,		
STREET ADDRESS	•		5.3 STRE	ET ADORESS			ĺ
CITY-ST-ZIP			5.4 CITY	ST-ZIP			}
TITLE	<del></del>	☐ DELETE	6.1 TITLE	·		☐ Change	Addition
NAME			6.2 NAM	<u>:</u>			ļ
STREET ADDRESS			6.3 STRE	ET ADDRESS			
CITY-ST-ZIP	•		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 like empowered

SIGNATURE:

SIGNATION SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #