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Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # S09131 1. Corporation Name

Principal Place of Business

PARK OVERLOOK, INC.

FILED Feb 18, 1999 8:00am **Secretary of State**

02-18-1999 90119 026 ***150.00



2. Principal Place of Business 2a. Mailing Address 4. FEI Number	SPACE	
		Applied For
21 25 59-3036080	Α, -	Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.	\$9.7	75 Additional
5. Certificate of Status Desired		e Required
0: 00:		
	-	.00 May Be ded to Fees
		ded to rees
2ip Country 2ip Country 8. This corporation owes the current year Int 24 25 29 30 Personal Property Tax.	angibie ∏Yes	□No
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered		L.,140
81 Name	- Beile	
ABBOTT, WILLIAM W., JR.		
35000 EMERALD COAST PARKWAY 82 Street Address (P.O. Box Number is Not Acceptable)		
DESTIN FL 32541 83	•	
 		
84 City	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	<u>- L</u>	a ite 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 appoint agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.	ntment a	as registered
SIGNATURE	····	
		
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 12 ADDITIONS (CHANGES TO DESICEDS AND DIRECTORS)	ID DIDE	CTOPS IN 12
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CITY-\$T-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 empoyages to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

SIGNATURE: