## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT # **V60329** 

(2)

<ol> <li>Corporation</li> </ol>	n Name	• •			
EASTO	ON PROPERTIES CORPOR	RATION		I I SAIN BUIGHA ANNA AANAA NAMA NAMA	ı
Principal Piace	of Business	Mailing Address		I SABAL ANIANA BUNCH BASAN NUMBUNDI	'S COLL BASA DIDA QUEL DIDA DIDA BIDA DIDI ADDI
1601 FORUM SUITE 1101 WEST PALM	A PLACE BEACH FL 33401	1601 FORUM PLACE Suite 1101 West Palm Beach I	Ei 924M		
WEGI TAEM	DENOTTE SOOT	WEST FALM BEAUTI	rt sayoi	3. Date Incorporated or Qualified 08/26/1992	3a. Date of Last Report 05/01/1995
2. Principal Pla	ace of Business	2a. Mailing Address		4. FEI Number 65-0466733	Applied For
<del></del>		Suite, Apt. #, etc.	·····		Not Applicable  \$8.75 Additional
22 27		27		5. Certificate of Status Desired	Fee Required
City & State		City & State		6. Election Campaign Financing	55.00 May Be
<b>23</b>   Zip	Country	<b>28</b>   - Ζιρ	Country	Trust Fund Contribution	Added to Fees
24	25	29	30	8. This corporation has liability for Florida Statutes  Yes	intangible tax under s. 199.032,
	9. Name and Address of Curre	ant Registered Agent		10. Name and Address of New R	legistered Agent
			81 Name		
STITT, WILLIAM E 1601 FORUM PLACE SUITE 1101 WEST PALM BEACH FL 33401			82 Street Add	iress (P.O. Box Number is Not Acceptab	ole)
			83		The state of the s
			84 City		FI 85 Zip Code
11. Pursuant t	a the provisions of Sections 607.050	02 and 607.1508, Florida Statut	es, the above named corpo	ration submits this statement for the pur	rpose of changing its registered office
or register familiar wit	ed agent, or both, in the State of Fio th, and accept the obligations of, Sec	rida, Such change was authoriz otion 607.0505, Florida Statutes	red by the corporation's boa i	ration salar installer accept the appropriate of directors. I hereby accept the appropriate of the propriate of the appropriate of the appropriate of the appropriate of the appropriate of the accept the appropriate of the	ointment as registered agent. I am
SIGNATURE	<u></u>				
12.	Signature, typed or printed name of registered ap- OFFICERS AI	ND DIRECTORS	<ol> <li>Filipstered April signation recurse</li> <li>13.</li> </ol>	ন জাল কোড'লেল ADDITIONS/CHANGES TO OFF	DATE
TITLE	P	☐ DELETE	1 1 TITLE	ALIAMONS STANGES TO OTT	Change Addition
NAME	STITT, WILLIAM E		1.2 NAME		
STREET ADDRESS 1601 FORUM PLACE, STE. 1101		U3 STPEFT ADDRESS			
CITY - ST - ZIP	WEST PALM BEACH FL 33		1.4 CHY - ST - ZIP		
TITLE		☐ DELETE	2 1 TOTLE		Change Addition
NAME STHEET ADDRESS			2 2 NAME		:
CITY - ST - ZIP			2.3 STREET ADDRESS		
TITLE		DELETE	24 CHY ST ZIP		Change Addition
NAME		_	32 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		]
City - ST - ZiP			3 4 C+TY - ST - Z+P		
TITLE		☐ DELETE	4 1 TITLE		Change Addition
NAME			4 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
C/TY - ST - ZiP		F1 per suc	4.4 C+TY - ST - Z+F		
TITLE		DELETE	5 1 TITLE		Change Addition
NAME			5 2 NAME		
STREET ADDRESS			5 3 STREET ADDRESS		
CITY - ST - ZIF TITLE		[] DELETE	5 4 CITY - ST - ZIP 6 1 TITLE		Change D Addition
NAME			62 NAME		Change  Addition
STREET ADDRESS			6 3 STREET ADDRESS		
CHTY-ST-ZIP			6.4 City - St - Zir		
	L-114		0.4 7/11/ 31.71/		

14. I do hereby certify that the information supplied with this tiling is voluntarily furnished and dives not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes | further certify that the information indicated on this annual residue, 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 trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if of signal astemption with an address.

SIGNATURE: BY

A PRESIDENT

4/30/96 407-842-2400

;R2E034 (12/95)