FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
95 JUL 18 AM 10:45

DOCUMENT # V69334 (3)

1. Corporation Name

CUTTER COVE DEVELOPMENT CORP.

Principal Place of Business: 600 BYPASS DRIVE, SUITE 215, CLEARWATER FL 34624

Mailing Address: 600 BYPASS DRIVE, SUITE 215, CLEARWATER FL 34624

800001545868
-07/25/95--01102--022
****225.00 ****225.00

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified	10/02/1992
3a. Date of Last Report	12/15/1994
4. FEI Number	59-3162633 (Applied For / Not Applicable)
5. Certificate of Status Desired	☑ $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution	☐ $5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes	☐ Yes ☐ No

2. Principal Place of Business: 21 ___ Suite, Apt. #, etc. 22 ___ City & State 23 ___ Zip 24 ___ Country 25 ___

2a. Mailing Address: 26 ___ Suite, Apt. #, etc. 27 ___ City & State 28 ___ Zip 29 ___ Country 30 ___

9. Name and Address of Current Registered Agent

WARD, R. CARLTON
1253 PARK STREET
CLEARWATER FL 34624

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 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 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 ___ DATE ___

12. OFFICERS AND DIRECTORS

TITLE	P
NAME	DORE, H. BRUCE III
STREET ADDRESS	600 BYPASS DRIVE, SUITE 215
CITY-ST-ZIP	CLEARWATER FL 34624
TITLE	VST
NAME	RYAN, JOHN M
STREET ADDRESS	134 ADELAIDE STREET E., SUITE 306
CITY-ST-ZIP	TORONTO, ONTARIO, CANADA

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

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******8.75 ******8.75

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(1)(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.

SIGNATURE: [signature] 7/17/95 813-724-9114

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — H. Bruce Dore

0350870 CP