

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

FILED
Apr 02, 1999 8:00 am
Secretary of State

04-02-1999 90019 019 ***150.00

DOCUMENT # V72653

1. Corporation Name

MANHATTAN DEVELOPMENT COMPANY, INC. OF MARTIN CO
UNTY

Principal Place of Business

915 PINE CASTLE COURT
STUART FL 34995
US

Mailing Address

PO BOX 1974
STUART FL 34995

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/13/1992

4. FEI Number

65-0366176

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 owes the current year Intangible
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

KOHL, N. DEAN
50 SE KINDRED STREET
STUART FL 34994

10. Name and Address of New Registered Agent

81 Name William R. Pensoldt
82 Street Address (P.O. Box Number is Not Acceptable)
1100 S. Federal HWY
83
84 City STUART FL 85 Zip Code 34994

11. Pursuant to the provisions of Sections 607.0502 and 607.1505, 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

Signature typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD
NAME GUNTHER, ROLF S
STREET ADDRESS 915 PINE CASTLE CT
CITY-ST-ZIP STUART FL

☐ DELETE

TITLE VP
NAME GUNTHER, ROLF S.
STREET ADDRESS 915 PINE CASTLE CT
CITY-ST-ZIP STUART FL 34996

☐ DELETE

TITLE T
NAME BENNETT, PATRICIA
STREET ADDRESS 4050 NE JOE'S POINT ROAD
CITY-ST-ZIP STUART FL 34996

☒ DELETE

TITLE S
NAME JOLLY, PAUL
STREET ADDRESS 414 SW LOG DR
CITY-ST-ZIP PT ST LUCIE FL

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☒ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ 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)(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:

SIGNATURE REQUIRED

Date

Daytime Phone #

3/19/99 541-225-1234

CR2E034 (11/98)