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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # G73159

OLD FIREHOUSE REALTY, INC.

Principal Place of Business Mailing Address 102800 OVERSEAS HIGHWAY 102800 OVERSEAS HIGHWAY KEY LARGO FL 33037 KEY LARGO FL 33037-2784 3. Date Incorporated or Qualified 3a. Date of Last Report 12/05/1983 03/12/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-2348267 Not Applicable 21 26 Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zip Country 200 Country 8. This corporation has liability for intangible tax under s. 199.032, Yes 🔀 No 24 25 29 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name LACROIX, LOU ANN **548 SOUND DRIVE** 82 Street Address (P.O. Box Number is Not Acceptable) **KEY LARGO 33037** 83 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 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, typed or printed name of registured agent and title if applicable (NOTE Registered Agent signature required w hen reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (98/6) (8/6) 12 OFFICERS AND DIRECTORS 13. Change Addition DELETE 1.1 TITLE 7111.6 LACROIX, LOU ANN NAME 1.2 NAME CR2E034 **548 SOUND DRIVE** STREET ADDRESS 1.3 STREET ADDRESS KEY LARGO FL CITY-ST-20 1.4 CiTY-ST-ZiP DELETE Change Addition 2.1 TITLE TITLE 2.2 NAME NAM STREET ADDRESS 2.3 STREET ADDRESS 011Y - ST - 2IP 2. 4 CITY-ST-ZIP DELETE Change 3.1 TITLE Addition 32 NAME NAMI STREET ACURESS 3 3 STREET ADDRESS 3.4. CITY - ST - 7/P CHTY - S.f - Z0 DELETE Change Addition 4.1 TITLE TIFLE 4 2 NAME MAM 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP COTY - \$1 - ZIP DELETE Change Addition TITLE 5.1 TITLE 5.2 NAME STREET ADDRESS **53 STREET ADDRESS** 5.4 CiTY - ST - ZiP CITY-ST 16 DELETE Change Addition THE 6.1 TITLE 6.2 NAME NAM 6.3 STREET ADDRESS STREET ADDRESS

6.4 CITY-ST-ZIP 14. I do hereby certify that the information supplied with this fiting 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

SIGNATURE:

appears in Block 12 or Block 13

C(1Y - S1 - 7)P

FILED

Apr 29 1997 8:00am

Secretary of State