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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

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Feb 27 1997 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # K13427

(5)

CENTURY 21 TANNASSEE REALTY, INC.

Principal Place of Business		Mailing Address			o issundata odar aldeno ariari saldeno klosir eisen ondar ondali olioki olioki olioki olioki eloki		
38 HOMESTEAD ROAD LEHIGH ACRES FL 33936 US		38 HOMESTEAD ROAD LEHIGH ACRES FL 33936 US					
				3. Date Incorporated or Qualified			
2. Principal Place of Business		2a. Mailing Address			4. FEI Number		Applied For
21		26					Vot Applicable
Suite Apt #, etc		Suite. Apt. #, etc. 27			5. Certificate of Status Desired Section Fee Required		
City & Stat	е	City & State			Election Campaign Financing Trust Fund Contribution		May Be to Fees
Ζιρ !4]	Country 25	Zip 29	Country 30	/	This corporation has liability for Florida Statutes	or intangible tay under	в. 199.032,
	9. Name and Address of Curr	ent Registered Agent			10. Name and Address of New F	legistered Agent	
WIN	ESETT, RICHARD W.		81	Name 25	INN R. TAUNASSE	E	
2248 FIRST ST			82	82 Street Address (P.O. Box Number is Not Acceptable) 36 HOMES TE AD BOAD			
447 11	11610 16 00001		83	<u> </u>	mes ie ne ibay		
			84	City FH	16H ACREC	FL 85 Zig	Code
11. Pursuant	to the provisions of Sections 607.09	02 and 607.1508, Florida Sta	tutes, the abov	e-named cor	noration cultimite this statement for the	purpose of phonoice	its registered
ornee or r	egistereo agent, or both, in the Sta m familiar with land accept the obli	te of Florida. Such change wa	is authorized hi	u the corpora	ation's board of directors. I hereby acc	ept the appointment a	s registered
SIGNATURE		INASSEE	Kum	n	Januassee	a. 24.9	2
	Signary ell typed or prefed name of registered a	gent and title if applicable (N		ent signature requ	ired when reinstating)	DATE	
12. Tille		ND DIRECTORS DELETE	13.		ADDITIONS/CHANGES TO OFF		
NAME	DPST TANNASSEE, LYNN R.		1.1 TITLE 1.2 NAME			Change	Addition
STREET ADDRESS	515 HAMILTON AVE			ADDRESS			
CITY-ST-ZIP	LEHIGH ACRES FL 33936		1.4 CITY - 5				
TITLE	LLI III I I I I I I I I I I I I I I I I	DELETE	2.1 T(TLE)1-2IF		☐ Change	Addition
NAME			2.2 NAME				
STREET ADDRESS			2.3 STREET	ADDRESS			
CITY - ST - ZIP			2. 4 CITY-	1			
TITLE		DELETE	3.1 TITLE		·	☐ Change	Addition
NAME			3.2 NAME				
SURFET ADDRESS			3 3 STREET	ADDRESS			
CITY - ST - ZIP			3 4, CITY-	ST-ZIP			
TITLE		☐ DELETE	4.1 TITLE		· · · · · · · · · · · · · · · · · · ·	☐ Change	Addition
NAME			4. 2 NAME				
STREET ADDRESS			4.3 STREET	ADDRESS			
City - S1 - 7IP			4.4 CITY-5	IT-ZIP			
îiTLE		☐ DELETE	5.1 TITLE			Change	Addition
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREET	ADDRESS			
CITY - ST - ZIP	**************************************		5.4 CITY - S	T-21P			
TOLE		☐ DELETE	6.1 TITLE			☐ Change	Addition
NAME I			6.2 NAME				
STREET ADDRESS			6.3 STREET	ADDRESS			
CHTY-ST-ZIP			6.4 CITY-S				
intormatio I am an of	n indicated on this annual report or	supplemental annual report is or the receiver or trustee empi	s true and accu owered to exec	irate and tha	d in Section 119.07(3)(i), Florida Statut t my signature shall have the same leg rt as required by Chapter 607, Florida	ral affect as if made ur	nder eath: that