## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**CORPORATION ANNUAL REPORT** 



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT #

M94263

TOWN AND COUNTRY REALTY OF SEBASTIAN, INC.

**FILED** May 12 1998 8:00am Secretary of State



Principal Place	of Business	Mailing	Mailing Address						
POST OFFICE	BOX 780068	POST	POST OFFICE BOX 780068						
SEBASTIAN F	L <b>329</b> 78	SEBAS	SEBASTIAN FL 32978						
							DO NOT WRITE IN THIS	SPACE	<del></del>
							3. Date Incorporated or Qualified		
							08/15/1988		
	ace of Business	2a. Mail	ing Address				4. FEI Number	-	Applied For
21		26	.4. 4. 4. 4. 4. 4. 4. 4. 4. 4. 4. 4. 4.				65-0067020		Not Applicable
Suite, Apt.	#, <b>e</b> tc.	Suite	Suite, Apt. #, etc.				5. Certificate of Status Desired		5 Additional
22		27							Required
City & State	•	City	City & State				6. Election Campaign Financing		00 May Be
23		28					Trust Fund Contribution	Add	led to Fees
Zip	Country	Zip		Cou	ntry		8. This corporation owes or has paid the cu		
24	25	29		30				Yes	□ No
	9. Name and Address of Curre	nt Registered	Agent				10. Name and Address of New Registered	Agent	
	CHER, CARL ANTHONY				81	Name			
10729 US-1					82	Street A	ddress (P.O. Box Number is Not Acceptable)		
SE	Bastian FL 32958								
					83		· ·		
					84	City		log ·	Zip Code
					Ė	•	Fl	_   ' '	· 1
11, Pursuani l	to the provisions of Sections 607 050	02 and 607.15	08, Florida Statu	tes, the at	oove	-named c	corporation submits this statement for the purpose	of changir	ng its registered
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.									
<u> </u>									
SIGNATURE	Signature, typed or printed name of registered ag	ent and the Capple	cable (NO	TL: Registered	1 Ager	nt signature ri	equired when reinstating) DATE		
12.	OFFICERS AN	D DIRECTOR	S	13.			ADDITIONS/CHANGES TO OFFICERS AN	D DIREC	TORS IN 12
TITLE	P		DELETE	1.1 10	TLE			Chan	ige 🔲 Addition
NAME	FISCHER, CARL ANTHONY			1.2 NA	ME				
STREET ADDRESS	523 CROSS CREEK CIR			1.3 ST	REET.	ADDRESS			
CITY-ST-ZIP	Sebastian FL			1.4 CI	1Y-S1	1-2IP			
TITLE	DVP		DELETE	2.1 T()				Char	nge Addition
NAME	FISCHER, HENRY A.		2.2 NA	2.2 NAME					
STREET ADDRESS	10733 US 1			2351	REFT	ADDRE\$S			
CITY-ST-ZIP	SEBASTIAN FL			2.40		i			
TITLE	8		DELETE	3.1 TI				Char	nge Addition
NAME	FISCHER, ERIC CARL			3.2 NA					
	10729 US-1					ADDRESS			
STREET ADDRESS	SEBASTIAN FL			1		- 1			
CITY-ST-ZIP	T		DELETE	3.4. CI 4.1 Til		1-211		Char	nge Addition
TITLE	FISCHER, CARL ANTHONY		LLJ DECETE						A COMMON
NAME	10729 US-1			4. 2 N					
STREET ADDRESS	SEBASTIAN FL			1		ADDRESS			
CITY-ST-ZIP	DEDAGINN FL		T Server	4.4 CI		1 - ZIP		Tm acc	Addition
TITLE			☐ DELETE	הך 5.1 11				∐ Char	nge L_1 Addition
name				5.2 NA	ME				İ
STREET ADDRESS				5.3 \$1	REET	address			
CITY-ST-ZIP				5.4 CI	TY-SI	I - 7IP			
TITLE			☐ DELETE	6.1 TO	TLF			L Char	nge 🔲 Addition
NAME				62 NA	AME				
STREET ADDRESS				63 \$1	AEET	address			
CITY-ST-ZIP				6 4 Cf	TY-S	r-zip			
	<del></del>							177 41 1	

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 suppliently annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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 or in all actiment with an address.