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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARAMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT # P93000025230 (2)

FILED Apr 14 1997 8:00am Secretary of State

1. Corporation Name GOLDEN REALTY AND APPRAISAL SERVICES, INC. Principal Place of Business Mailing Address P.O. BOX 6088 OCALA FL 34478-6088						
				3. Date Incorporated or Qualified 04/01/1993	3a. Date of Last 04/09/1996	
	Place of Business	2a. Mailing Address	long	4. FET Number 59-3174783	 	Applied For
21 3361 Suite, Apt.	S. Pine Aul.	26 P.O. OOX Suite, Apt. #, etc.	4000	5. Certificate of Status Desired	\$8.75	Not Applicable Additional
City & Stat	10 10	City & State	10	Election Campaign Financing	\$5.0	Required May Be
23 <u>(Ca</u>		28 Oca la	J.J.	Trust Fund Contribution		d to Fees
Zip 24 3447	25 Country 25 USA 9. Name and Address of Curre	20 34478	$\begin{bmatrix} 1 & \text{Country} \\ [30] & \text{OSA} \end{bmatrix}$	8. This corporation has liability for Florida Statutes 10. Name and Address of New R	☐ Yes 🔏 No	s. 199.032,
90 30 00	LDEN, RICHARD R 561 S. Piul Aul ata Fl 34478	an negatired Agent	81 Name GO 82 Street Add 83 51	Iden Richard R 1985, IP.O Box Number is Not Agenta 1987 S. Prye August	blg)	
			84 City Occ	ala	FL TV	Code
office or agent. I a			-	oration submits this statement for the ion's board of directors. I hereby according to the control of the contr		its registered
12.	Signature, typod or printed name of registered a OFFICERS A	gent and tree l'applicable (NOT ND DIRECTORS	Registered Agent signature require 13.	ed when reinstating) ADDITIONS/CHANGES TO OFFI	DATE CERS AND DIRECTO	ORS IN 12
TITLE	PO	DELETE	1.1701.6		Change	
NAME	GOLDEN, RICHARD R		1.2 NAME			l
STREET ADDRESS	9 ALMOND TRAIL OCALA FL		1.3 STREET ADDRESS			
CITY-ST-ZIP	UUNLA FL	DELETE	1.4 CITY - ST - ZIP 2.1 TITLE		Change	Addition
NAME I		C out	22 NAME			7,004,011
STREET ADDRESS			2.3 STREET ADDRESS			Ì
CITY-ST-ZIP		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	2. 4 CITY- \$1-ZIP			
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NAME			3.2 NAME			ļ
STREET ADDRESS			3.3 STREET ADDRESS			
CITY-ST-ZIP		DELFTE	3.4. CITY- S1- ZIP 4.1 TITLE		Change	Addition
NAME			4, 2 NAME			
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CITY-ST-ZIP			4.4 CITY-ST-ZIP			
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	1					
CITY-ST-ZIP			5.4 CHY-\$1-2tP			
TITLE		DELETE	6.1 THE	**************************************	Change	Addition
TITLE NAME		DELETE	6.1 TITLE 6.2 NAME		Change	Addition
TITLE		DELETE	6.1 THE		Change	Addition

Information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same logal offect 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 Statules; and that my name appears in Block 12 or Block 13 if chyliged, or trustee in address.

Richard R. Golden