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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

**FILED** 

Apr 28 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT #

Principal Place of Business

P93000066358<del>V\$\$\$93</del>

Mailing Address

ANCLOTE KEY REALTY, INC.

| Suite                                                   | ing Ave.<br>300<br>SPRINGS, FL                                                                                       | Suite 3                   | ing Ave.<br>00<br>Springs,    | FL                                                    | 3. Date Incorporated or Qualified 2/8/93                                                 | 3a. Date of 4/1:                     |                                          |
|---------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------|---------------------------|-------------------------------|-------------------------------------------------------|------------------------------------------------------------------------------------------|--------------------------------------|------------------------------------------|
| 2. Principa P                                           | acce of Business                                                                                                     | 28. Mailing Addre         | SS                            |                                                       | 4. FEI Number                                                                            | -1-:: <u></u>                        | Applied For                              |
| 21                                                      |                                                                                                                      | 26                        |                               |                                                       | 59-321268                                                                                |                                      | Not Applicable                           |
| Suite, Apri<br>22                                       |                                                                                                                      | Suite, Apt. #, (          | elc.                          |                                                       | 5. Certificate of Status Desired                                                         |                                      | 3.75 Additional<br>Fee Required          |
| City & State<br>23                                      | e                                                                                                                    | City & State              |                               |                                                       | Election Campaign Financing     Trust Fund Contribution                                  |                                      | 5.00 May Be<br>Added to Fees             |
| Ζφ<br><b>24</b>                                         | Country 25                                                                                                           | Zip<br>29                 | Country<br>30                 |                                                       | 8. This corporation has liability for in Florida Statutes                                | ntangible tax ⊔<br><b>X</b> Yes ☐ No |                                          |
|                                                         | 9. Name and Address of Curr                                                                                          | ent Registered Agent      |                               |                                                       | 10. Name and Address of New Re                                                           | gistered Agent                       |                                          |
| George                                                  | N. Klimic D.A.                                                                                                       |                           | 61                            | Name                                                  |                                                                                          |                                      |                                          |
| George N. Klimis, P.A.<br>30 North Ring Ave., Suite 400 |                                                                                                                      |                           |                               | 82 Street Address (P.O. Box Number is Not Acceptable) |                                                                                          |                                      |                                          |
| Tarpon                                                  | Springs, FL 346                                                                                                      | 589                       | 83                            |                                                       |                                                                                          |                                      |                                          |
|                                                         | -                                                                                                                    |                           | 84                            | City                                                  | ······································                                                   | FL 85                                | Zip Code                                 |
| off-color r                                             | to the provisions of Sections 607 05<br>egistered agent, or both, in the Sta<br>ni familiar with, and accept the obt | te of Florida, Such chang | e was authorized by           | the corpor                                            | rporation submits this statement for the p<br>ation's board of directors. I hereby accep | urpose of chan                       | ging its registered<br>ent as registered |
| SIGNATURE                                               |                                                                                                                      |                           | (NOTé. Registered Age         |                                                       |                                                                                          | DATE                                 |                                          |
| 12.                                                     | OFFICERS A                                                                                                           | ND DIRECTORS              | (NOTE: Hegistered Age         | eni signature req                                     | ADDITIONS/CHANGES TO OFFIC                                                               |                                      | CTORS IN 12                              |
| 111.1                                                   | DPVST                                                                                                                | DEL                       |                               |                                                       | 110000000000000000000000000000000000000                                                  | ☐ C                                  |                                          |
| NAV:                                                    | Yvy Peck-Klimis                                                                                                      | •                         | 1.2 NAME                      |                                                       |                                                                                          |                                      |                                          |
| STREET ADDRESS                                          | 2109 Sandpiper                                                                                                       |                           | 1.3 STREET                    | ADDRESS                                               |                                                                                          |                                      |                                          |
| CHY+SE 769                                              | Tarpon springs,                                                                                                      | LI SECTO                  | 1.4 CITY - 9                  | 17-21P                                                |                                                                                          | *                                    |                                          |
| TIFLE                                                   | ranton britings;                                                                                                     | LT 2#063 DET              | ÉTÉ 2.1 TITLE                 |                                                       |                                                                                          | □ c                                  | hange Addition                           |
| MW4                                                     |                                                                                                                      |                           | 2 2 NAME                      |                                                       |                                                                                          |                                      |                                          |
| STREET ADEC 35                                          |                                                                                                                      |                           | 23 STREET                     |                                                       |                                                                                          |                                      |                                          |
| EGY 5 - 74                                              |                                                                                                                      | DEL                       | 2 4 CITY - :<br>FTE 3 1 THILE | ST-ZIP                                                |                                                                                          | ☐ C                                  | hange Addition                           |
| 11'11                                                   |                                                                                                                      | L DIC                     | : 32 NAME                     |                                                       |                                                                                          | <b>□</b>                             | lange L_1 Audinon                        |
| NAME<br>STRUET ADDRESS TO                               |                                                                                                                      |                           | 33 STREET                     | AUDDECC                                               |                                                                                          |                                      |                                          |
| (31 t S1 70)                                            |                                                                                                                      |                           | 34 CITY-5                     |                                                       |                                                                                          |                                      |                                          |
|                                                         |                                                                                                                      | ☐ DEL                     |                               |                                                       |                                                                                          | □ c                                  | harige Addition                          |
| 5231                                                    |                                                                                                                      |                           | 4. 2 NAME                     | 1                                                     |                                                                                          |                                      |                                          |
| STREET ALKAPERS                                         |                                                                                                                      |                           | 4.3 STREET                    | ADDRESS                                               |                                                                                          |                                      |                                          |
| GFV 51 76                                               |                                                                                                                      |                           | 4.4 CITY - S                  | T-ZIP                                                 | <i>\</i>                                                                                 | 47                                   |                                          |
| 1.84                                                    |                                                                                                                      | ☐ DEL                     | ETE 5.1 TITLE                 |                                                       | 1) you                                                                                   | $M \cap \mathbb{C}$                  | hange 🔲 Addition                         |
| nam.                                                    |                                                                                                                      |                           | 5.2 NAME                      |                                                       | <i>Q</i> , 7                                                                             | • •                                  |                                          |
| 5 HELLA GREEK                                           |                                                                                                                      |                           | 5.3 STREET                    | ADDRESS                                               | 11.0                                                                                     | Ø                                    |                                          |
| 028-51-79                                               |                                                                                                                      |                           | 5.4 CITY - S                  | 915-11                                                |                                                                                          |                                      |                                          |
| Th                                                      |                                                                                                                      | □ DE).                    |                               |                                                       | <b>8000021</b> 5<br>-04/30/970102                                                        | 3356                                 | ange                                     |
| NAM<br>SARIO 1 AUGUSTO                                  |                                                                                                                      |                           | 6.2 NAME<br>6.3 STREET        | **************************************                | ***165.00                                                                                | 2                                    |                                          |
| STREET ALLOWS:                                          |                                                                                                                      |                           | ■ 635IREF                     | BUBURESS I                                            | ጥጥጥ ፤ በአጋ - ይህመ                                                                          |                                      |                                          |

14. To hereby northly 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 studie and containing the same legal effect as if made under oath; that Larran or filed 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 acceptas in Block 12 or Block 13 if changed on an attachmost with an address.